# M05000003697

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#### TRANSMITTAL LETTER

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TO: Registration Section Division of Corporations			
SUBJECT: J & L Eagle Cove, LLC			
	imited Liability Company)		
	Liability Company for Authorization to Transact Business in submitted to register the above referenced foreign limited		
Please return all correspondence concerning this	matter to the following:		
Myra S. Shi	pes		
. (1	Name of Person)		
Farmer, Price, Ho	rnsby & Weatherford, LLP		
(F	Firm/Company)		
P. O. Drawer 2228			
	(Address)		
Dothan, Alabama 36302			
(City/S	State and Zip Code)		
For further information concerning this matter, p	lease call:		
Myra Shipes	at (		
(Name of Person)	(Area Code & Daytime Telephone Number)		
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the following amount:			

\$125.00 Filing Fee \( \text{Certificate} \) \$130.00 Filing Fee \( \text{Certificate} \) \$155.00 Filing Fee \( \text{Certified Copy} \) \( \text{Certified Copy} \) \( \text{S160.00 Filing Fee, Certified Copy} \)

### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUIES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	J & L EAGLE COVE, LLC
	(Name of Foreign Limited Liability Company)
2.	ALABAMA 3.
7	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4.	6/9/2005 5. Perpetual (Date of Organization) (Duration: Year limited liability company will cease to
_	exist or "perpetual") 6/9/2005
6.	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7.	2733 Ross Clark Circle
· •	Dothan, Alabama 36301
	(Street Address of Principal Office)
	If limited liability company is a manager-managed company, check here
	The name and usual business addresses of the managing members or managers are as follows:  Larry G. Blumberg - Manager
	2733 Ross Clark Circle, Dothan, Alabama 36301
	Res
	<del>-</del> 3
he	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of record jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a salation of the certificate under cath of the translator must be submitted.)
1.	Nature of business or purposes to be conducted or promoted in Florida:
	Real Estate Development
	Fan Blunberg
	Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)  Larry G. Blumberg
	Typed or printed name of signee

### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of	the Limited Liability Company is	s:					
J	& L EAGLE COVE, LLC					_	
2. The name and	d the Florida street address of the	registered ag	gent and office are:				
	CT CORPORATION SYSTEM						
	(Name)						
1200 S. Pine Island Road							
Florida Street Address (P.O. Box NOT ACCEPTABLE)							
	Plantation	FL	33324	SECR TV.LLA	7925	-IJ	
City/State/Zip							
Umiya baay nam	and an variatowal again and to appear	ant complex of	nuceass for the above	SESSON AND	(N) (O) Iimzīškai		
liability company agent and agree t relating to the pro	ned as registered agent and to acce of at the place designated in this cer to act in this capacity. I further ag oper and complete performance of position as registered agent as pr	rtificate, I hero gree to comply f my duties, ar	eby accept the appoing with the provisions and I am familiar with	ntment a of all sid and acc	is registe atules cept the	erea	

Filing Fee for Application

Certified Copy (optional)

Designation of Registered Agent

Certificate of Status (optional)

MARY R. ADAMS

**ASSISTANT SECRETARY** 

\$ 100.00

\$ 25.00

\$ 30.00

5.00

Nancy L. Worley Secretary of State P.O. Box 5616 Montgomery, AL 36103-5616

# STATE OF ALABAMA

I, Nancy L. Worley, Secretary of State of the State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the domestic corporate records on file in this office disclose that J & L Eagle Cove, LLC organized in the office of the Judge of Probate of Houston County on June 9, 2005. I further certify that the records do not disclose that said J & L Eagle Cove, LLC has been dissolved.

JECRETARY OF STATE



In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the City of Montgomery, on this day.

June 21, 2005

Date

Trancy L. Farley

Nancy L. Worley

Secretary of State