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(Requestor's Name)	
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(City/State/Zip/Phone #)	
(Business Entity Name)	<u></u>
(Document Number)	<u> </u>
Certified Copies Certificates of Status	
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07/25/05--01047--015 **155.00



N. Culligan JUL 28 2005

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations

PED Trust, LLC. (Name of Limited Liability Company) SUBJECT:

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

PAT DOWNEY
(Name of Person)
PED Trust, LLC. (Firm/Company)
11376 CHAMPIONSHIP DRIVE,
(Address)
FORT MYERS, FLORIDA 33913
(City/State and Zip Code)
t Compatible construction that we start a start south

For further information concerning this matter, please call:

BRIAN DOWNEY (Name of Person) _____at (<u>260</u>) <u>438-2935</u> (Area Code & Daytime Telephone Number)

> MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

STREET ADDRESS:

Enclosed is a check for the following amount:

\$125.00 Filing Fee □ \$130.00 Filing Fee & □ \$160.00 Filing Fee, Certificate Certificate of Status Certified Copy of Status & Certified Copy

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

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

1.	(Name of Foreign Limited Liability Company)	
2	INDIANA 3. 54 - 2/78/7/ (Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applicable)	<u></u>
4.	AUGUST 9, 2004 5. PERPETUAL (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	-
б.	So S	VISE
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	ORE
7.	2332 BARRY KNOLL WAY	
	FORT WAYNE, INDIANA 46845 (Street Address of Principal Office)	
8.	If limited liability company is a manager-managed company, check here	'A

9. The name and usual business addresses of the managing members or managers are as follows:

PA	r downey	<u>- 11367</u>	CHAMPI(NSHIP	DR.	FT.	MYERS,	<u>FL 33913</u>
<u>Ch</u>	risty Do	wney-	Same_	addre	55	<u> </u>		

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: TO ENGAGE IN ANY

LAWFUL ACTIVITY	FOR WHICH A	LIMITED	LIABILI	FY Ç(OMPANY	MAY BE		
ORGANIZED UNDER	TITLE XXXVI	, CHAPTER	608 OF	THE	FLORID	A STATUTE.		
Par Journey								

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.)

> PAT DOWNEY 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:

PED Trust; LLC

2. The name and the Florida street address of the registered agent and office are:

PAT DOWNEY	<u> </u>
(Name)	DIVISI
11367 CHAMPIONSHIP DRIVE	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	25
FT. MYERS FL 33913	PH 12:
City/State/Zip	ATIONS 5:54

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

(Signature)

- **\$ 100.00** Filing Fee for Application
- **\$ 25.00** Designation of Registered Agent
- **\$ 30.00** Certified Copy (optional)
- \$ 5.00 Certificate of Status (optional)

STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greetings:

I. TODD ROKITA, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

PED TRUST, LLC

duly filed the requisite documents to commence business activities under the laws of State of Indiana on August 09, 2004, and was in existence or authorized to transact business in the State of Indiana on July 17, 2005.

I further certify this Domestic Limited Liability Company (LLC) has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Seventeenth Day of July, 2005.

TODD ROKITA, Secretary of State

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