m05000005421

	(Requestor's Name)
_	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-	UP WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instruction	ons to Filing Officer.
Name (or the section of separation and description	
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SECRETARY OF STATE

penaly

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: JUT	CRSTATE GLOUP, LL C (Name of Limited Liability Company)
	oreign Limited Liability Company for Authorization to Transact Business in e, and check are submitted to register the above referenced foreign limited siness in Florida
Please return all correspondence	concerning this matter to the following:
_	SUE HAWKINS
	(Name of Person)
	CSTATE GROUP LLC = CFIRM/Company) FE E
	(Firm/Company) LLARE SER SER SER SER SER SER SER SER SER S
	(Address)
	ONWAY AR 72034 E (City/State and Zip Code)
	(City/State and Zip Code)
For further information concern	ing this matter, please call:
SUE HAD	OKINS at (50/) 505-20/7 (Area Code & Daytime Telephone Number)
(Name of	Person) (Area Code & Daytime Telephone Number)
STREET ADDRESS: Registration Section Division of Corporation 409 E. Gaines Street	P.O. Box 6327
Tallahassee, Florida 323	99 Tallahassee, Florida 32314

□ \$130.00 Filing Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate

Certificate of Status Certified Copy of Status & Certified Copy

Enclosed is a check for the following amount:

\$125.00 Filing Fee



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

September 15, 2005

SUE HAWKINS INTERSTATE GROUP LLC 3601 DAVE WARD DR CONWAY, AR 72034

SUBJECT: INTERSTATE GROUP LLC

Ref. Number: W05000043021

We have received your document for INTERSTATE GROUP LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$1,050.00.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6913.

Letter Number: 205A00057118

Diane Cushing Document Specialist

Division of Comparations P.O. BOY 6227 Tallahanna Florida 22214

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

	INTERSTATE GROUP LLC.
	(Name of Foreign Limited Liability Company)
	fluin under the law of which foreign limited liability 3. 37-1398268 (FEI number, if applicable)
risdict mpany	ion under the law of which foreign limited liability (FEI number, if applicable) is organized)
	5-4-2000 5. PERPETUAL (Date of Organization) (Duration: Year limited liability company will cease to
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
	クル・ドゥ・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・
	Conway Al 72634 SA T
	(Street Address of Principal Office)
	ted liability company is a manager-managed company, check here
The no	
1110 110	ame and usual business addresses of the managing members or managers are as follows:
	MICHAEL SNOW 3601 DAVE WARD OR CONWAY SHAWN LUTEYN 224 CARNATION DR NAMPA
	MICHAEL SNOW 3601 DAVE WARD DR CONWAY SHAWN LUTEYN 224 CARNATION DR NAMPA,
Attach	MICHAEL SNOW 3601 DAVE WARD OR CONWAY SHAWN LUTEYN 224 CARNATION BR NAMPA ed is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of rection under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a
Attach jurisdict	MICHAEL SNOW 3601 DAVE WARD OR CONWAY SHAWN LUTEYN 224 CANNATION BR NAMPA, ed is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of recition under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a of the certificate under oath of the translator must be submitted.)
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Attache jurisdict slation	MICHAEL SNOW 3601 DAVE WARD DR CONWAY SHAWN LUTEYN 224 CARNATION BR NAMPA ed is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of recion under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a of the certificate under eath of the translator must be submitted.) are of business or purposes to be conducted or promoted in Florida: Solle of travele Signature of a member or an authorized representative of a member.
. Attach	MICHAEL SNOW 3601 DAVE WARD DR CONWAY SHAWN LUTEYN 224 CARNATION BR NAMPA ed is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of rection under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a of the certificate under eath of the translator must be submitted.) are of business or purposes to be conducted or promoted in Florida: Sole of travele Mans
Attach jurisdict	MICHAEL SNOW 3601 DAVE WARD OR CONWAY SHAWN LUTEYN J24 CARNATION BY NAMEA ed is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of recition under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a of the certificate under eath of the translator must be submitted.) are of business or purposes to be conducted or promoted in Florida: 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

2002/002

· 09/02/2005 FRI 14:10 FAX 15015052030 INTERSTATE CONWAY

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.

 The name of the Limited ! 	Liability Company is:	
	INTERSTATE GROUP U.C.	
2. The name and the Florida	a street address of the registered agent and office are:	
NRAI Servic	cas, inc.	
	(Name)	2005 SEC
2731 Execu	olive Park Drive, Suite 4	<u> </u>
Florida Street Address (P.O. Box NOT ACCEPTABLE)		SEP 2 RETAR
Weston	FT. 33331	EE CO
44621011	City/State/Zio	— चर्च ਹ
	City state 7,19	100 W
	tered agent and to accept service of process for the above	
	e designated in this certificate, I hereby accept the appoint	
	is capacity. I further agree to comply with the provisions a complete performance of my duties, and I am familiar with t	
	s registered agent as provided for in Chapter 608, Florida	
NRAI Services, Inc.	1	
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Signal (Signal	dura o	-
(Jaguara	Us & Slorely	

\$ 100,00 Filing Fee for Application
\$ 25,00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

File Number

0041097-7



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illings hereby certify that

INTERSTATE GROUP, LLC,
HAVING ORGANIZED IN THE STATE OF ILLINOIS ON MAY 04, 2000,
APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE DIMITED
LIABILITY COMPANY ACT OF THIS STATE RELATING TO THE FILING
OF THE ARTICLES AND PAYMENT, AND IS ORGANIZED TO TRANSACT
BUSINESS IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois this

the State of Illinois, this

day of

AUGUST

A.D.

2005

Desse White