M0500005872

(Requestor's Name)
(Address)
(Address)
(1,001,000)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dualitus Linuty Haine)
(Document Number)
Certified Copies Certificates of Status
Consideration to Eliteration
Special Instructions to Filing Officer:

Office Use Only



300060435713

10/17/05--01046-005 OCT 17 PM 3: 56

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Gulf Side, LLC (Name of Limit	ited Liability Company)
	bility Company for Authorization to Transact Business in bmitted to register the above referenced foreign limited
Please return all correspondence concerning this m	atter to the following:
Amy J. Tawney (Nam	me of Person)
Bowles Rice McDavid Graff_&	
(Fir	m/Company)
600 Quarrier Street	
	(Address)
Charleston, WV 25301	182 (0.1)
(City/Sta	ate and Zip Code)
For further information concerning this matter, plea	ase call:
Amy J. Tawney	_ at (304)347~1123
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
409 E. Gaines Street	P.O. Box 6327
Tallahassee, Florida 32399	Tallahassee, Florida 32314
Enclosed is a check for the following amount:	
☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of	XX \$155.00 Filing Fee & \$\Bigsim \\$160.00 Filing Fee, Certificate 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:

	(Name of For	eign Limited Liabi	lity Company)		
We	est Virginia	3	20-3435319		
(Jurisdiction company is o	under the law of which foreign lin organized)	nited liability	(FEI numl	er, if applicable)	
. <u>Septemb</u>	er 8 2005 (Date of Organization)	5	December 31, 2 (Duration: Year limited exist or "perpetual")	050 liability company will	cease to DIVIS
на на	ve not transacted husi (Date first transacted (See sections 608.501	ness in Flor business in Florida & 608.502 F.S. to c	i.da , if prior to registration letermine penalty liabili) ty)	00 17
·75	Lewellyn Road			 	
24	tm: 00500				မှ နို
MC	organtown, WV 26508	Street Address of P	rincipal Office)		<u> </u>
John F	Jarrett, 107 Beechvale Riddel, P. O. Box 542, Edmond, 75 Lewellyn Ro	Round Hill,	VA 20142		
		ller Pend W	inchester, VA	22602	
Willia	am Allen Martin, 129 Mi	TIEL ROAD, W			
). Attached is e jurisdiction	am Allen Martin, 129 Mi an original certificate of existence, no under the law of which it is organize ne certificate under oath of the translat	o more than 90 days d. (A photocopy is a	old, duly authenticated b		-
O. Attached is c jurisdiction anslation of th	an original certificate of existence, no under the law of which it is organize	o more than 90 days d. (A photocopy is a for must be submitte	old, duly authenticated b not acceptable. If the cert d.)	ificate is in a foreign lar	-
Attached is e jurisdiction unslation of the latter of the	an original certificate of existence, no under the law of which it is organize ne certificate under oath of the translat	o more than 90 days d. (A photocopy is a for must be submitte	old, duly authenticated b not acceptable. If the cert d.)	ificate is in a foreign lar	-
Attached is e jurisdiction unslation of the latter of the	an original certificate of existence, no under the law of which it is organize the certificate under eath of the translate of business or purposes to be property Signature of a ment (In accordance with sections)	o more than 90 days d. (A photocopy is a for must be submitted or producted or producted or producted or an authoron 608.408(3), F.S., t	old, duly authenticated b not acceptable. If the cert d.)	ownership of of a member.	-

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.

Gulf Side	, LLC			_ :.	· ·
The name and the	he Florida street address of	the registere	ed agent and off	ice are:	e e
	Larry Tos			<u> </u>	05 OCT
		(Name)			7 0
	5931 17th Florida Street Addres	Avenue, S		<u>, , , , , , , , , , , , , , , , , , , </u>	PH 3: 56
_	Gulfport,	FL City/State/Z	33707		σ n
		org, oute, 2	·r		

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.

Jamy Josi
(Signature)

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



I, Betty Ireland, Secretary of State of the State of West Virginia, hereby certify that

GULF SIDE, LLC

made application to the West Virginia Secretary of State's Office to be a registered limited liability company in the State of West Virginia on September 8, 2005. The application was received and found to conform to law.

The company is filed as a term company, for the term ending December 31, 2055

I further certify that the company's most recent annual report, as required by West Virginia Code §31B-2-211, has been filed with our office and that a Certificate of Termination has not been issued.

Accordingly, I hereby issue this

CERTIFICATE OF EXISTENCE



Given under my hand and the Great Seal of the State of West Virginia on this day of October 11, 2005

Detty Treland

Secretary of State