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SECHETALL STATE

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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Woodland Venture Partners LLC
(Name of Limited Liability Company)
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:
William J. Stamps
(Name of Person)
Woodland Venture Partners LLC
(Firm/Company)
808 Brickell Key Drive, Suite #2202
(Address)
Miami, FL 33131
(City/State and Zip Code)
For further information concerning this matter, please call:
William J. Stamps at (305) 607-0177
(Name of Person) (Area Code & Daytime Telephone Number)
MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: \$\Bigsiz \frac{1}{2} \cdot \frac{1}{2

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:

Woodland Ven	ture Partners LLC		1	
	(Name of Foreign Li		· · ·	
Delaware		3.	57-1226630	
(Jurisdiction under company is organi	r the law of which foreign limited lia zed)	bility	(FEI number, if applicable))
9/14/2005	,	5	Perpetual	
(Da	ate of Organization)	٦.	(Duration: Year limited liability companiexist or "perpetual")	y will cease to
			exist of perpetual)	
N/A	(Date first transacted business	ss in Flori	ida, if prior to registration.)	
	(See sections 608.501 & 608.5	502 F.S. t	o determine penalty liability)	
808 Brickell h	Key Drive, Suite 2202, Miam	i, FL 33	3131	
	(Street A	ddress of	f Principal Office)	
. If limited liabi	ility company is a manager-ma	maged c	ompany, check here	
. 11 mmca naoi	my company is a manager ma	magea e		
. The name and	usual business addresses of th	ie manaį	ging members or managers are as fol	llows:
William J. Sta	amps, 808 Brickell Key Drive, S	uite 220	2, Miami, FL 33131	
0. Attached is an ori	iginal certificate of existence no more t	than 90 da	ays old, duly authenticated by the official havi	ng custody of reco
	•		is not acceptable. If the certificate is in a forei	-
anslation of the certi	ificate under oath of the translator must	t be submi	itted.)	
1. Nature of bus	siness or purposes to be condu	cted or	promoted in Florida: electronics sa	les via interne
				•
	///	15		% 8 <u>₹</u>
	Signature of a member of	r an auth	norized representative of a member.	ESS FI
			s., the execution of this document constitutes y that the facts stated herein are true.)	FARE FEB
		cem .	To Stamps	27
			name of signee	# 2
	-7,500.1			

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 I	ability Company is:	
	Venture Par	,	
2. The name	and the Florida	reet address of the registered agent and office are:	
	William J.	tamps (Name)	
	 	Key Drive, Suite 2202	
	F	orida Street Address (P.O. Box <u>NOT</u> ACCEPTABLE)	
	Miami	FL 33131	

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.

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

Certificate of Status (optional)

5.00

SECHETALL STATE

APPHOVI-D

Delaware

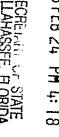
PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "WOODLAND VENTURE PARTNERS LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTEENTH DAY OF FEBRUARY, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "WOODLAND VENTURE PARTNERS LLC" WAS FORMED ON THE FOURTEENTH DAY OF SEPTEMBER, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.





Warriet Smith Hindson

AUTHENTICATION: 4519349

DATE: 02-13-06

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