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ZGOB MAR 11	P 3: 57
SECRETARY (Requestor's Name) TALLAHASSE	CF STATE E. FLORIDA
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TO: Registration Section Division of Corporations

SECRETARY OF STATE

SUBJECT: Y. L.F. FAMILY AGRET MANAGEMENT, L.L.C. (Name of Limited Liability Company)

(Name of Emmed Elaoting 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:

DEMORAH FRAZIER
(Name of Person)
CAVALRY CONSTRUCTION CO., L.P.
(Firm/Company)
6911 BREEN, BUILDINGC
(Address)
HOLISTON, TEXAS 77086
(City/State and Zip Code)

For further information concerning this matter, please call:

FRANK JONES	at(181_)9h1.9900
(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:		
		□\$155.00 Filing Fee &	□\$160.00 Filing Fee, Certificate
-	Certificate of S		

FILED

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA 2006 MAR 14 P 3: 57

IN COMPLIANCE W. LIMITED LIABILITY C	TTH SECTION 608.503, FL OMPANYTO TRANSACT B	ORIDA STATUTES, USINESS IN THE ST	THE FOLLOWING IS SUBMITATED IN TATE OF FLORIDA: TALLA!	TRICISTER 4 FOREIGN ASSEF, EL DRIDA
1. P. L.F.	FAMILY AC	MET MAK	IAGEMENT, L.L.C.	
	(Name of F	oreign Limited Lia	oility Company)	
2. TEXA (Jurisdiction under company is organi	the law of which foreign l		(FEI number, if applicat	
4. FEMRU	ARY 20, 200. te of Organization)	<u>l</u>	PERPETUAL (Duration: Year limited liability compexist or "perpetual")	any will cease to
6. N/A				
	(Date first transacte (See sections 608.50	ed business in Florid 1 & 608.502 F.S. to	la, if prior to registration.) determine penalty liability)	
7. 6911 1	DREEL BUIL	101160		
House	TON TEXAG	77086		
		(Street Address of	Principal Office)	
9. The name and	usual business address	ses of the manag	ing members or managers are as	follows:
the jurisdiction under		zed. (A photocopy i	s old, duly authenticated by the official has not acceptable. If the certificate is in a forted.)	
11. Nature of bus	siness or purposes to b	e conducted or p	romoted in Florida:	
	GENERAL	CONSTRU	CTION	
	SPI	7		
	(In accordance with see an affirmation under t	ction 608.408(3), F.S. he penalties of perjury	orized representative of a membe, the execution of this document constitutes that the facts stated herein are true.)	- т.
		PLANK R.	JONES	_
	Ту	yped or printed n	ame of signee	

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CERTIFICATE OF DESIGNATION OF MAR 14 P 3: 57 REGISTERED AGENT/REGISTERED OFFICE TALLAHAS STATE

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:							
			_				

P.L.F. FAMILY AMOET MANAGEMENT, L.L.C.

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

Name)

119 GE 12TH GTREET

Florida Street Address (P.O. Box NOT ACCEPTABLE)

FT. LAUDERDALE, FL 3M316

City/State/Zip

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

agent and agree to act in this capacity. I further agree to comply with the provisions of all staturelating to the proper and complete performance of my duties, and I am familiar with and accept 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)

\$ 5.00 Certificate of Status (optional)

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



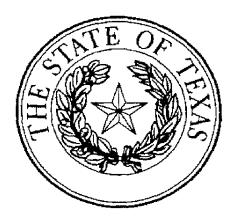
Roger Williams Secretary of State

Office of the Secretary of State

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles of Organization for P.L.F. FAMILY ASSET MANAGEMENT, L.L.C. (filing number: 800057212), a Domestic Limited Liability Company (LLC), was filed in this office on February 20, 2002.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on February 28, 2006.



Roger Williams

Roger Williams Secretary of State

Come visit us on the internet at http://www.sos.state.tx.us/ Phone: (512) 463-5555 Prepared by: SOS-WEB

TTY: 7-1-1 Document: 119004170003