

Division of Corporations

Page 1 of 1

*M0600000 3016*

Florida Department of State  
Division of Corporations  
Public Access System

Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H06000148175 3)))

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To: Division of Corporations  
Fax Number : (850)205-0383

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850)222-1092  
Fax Number : (850)878-5926

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

06 JUN - 1 AM 9:53

FILED

*6-2 West*

**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**ARLINGTON ROCK ISLAND, LLC**

RECEIVED  
06 JUN - 1 AM 7:44  
DIVISION OF CORPORATION

Certificate of Status	1
Certified Copy	1
Page Count	04
Estimated Charge	\$160.00

Electronic Filing Menu

Corporate Filing Menu

Help

**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. ARLINGTON ROCK ISLAND, LLC  
(Name of Foreign Limited Liability Company)

2. ALABAMA 3. 20-4794891  
(Jurisdiction under the law of which foreign limited liability company is organized) (PEI number, if applicable)

4. APRIL 28, 2006 5. PERPETUAL  
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")

6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. 2117 SECOND AVENUE NORTH  
BIRMINGHAM, AL 35203  
(Street Address of Principal Office)


8. If limited liability company is a manager-managed company, check here

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

ARLINGTON PROPERTIES, INC.  
2117 SECOND AVENUE NORTH  
BIRMINGHAM, AL 35203

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 acquire undeveloped land in Dixie County, Florida, and to develop said land.

  
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.)  
ARLINGTON PROPERTIES, INC. ITS: MEMBER

Typed or printed name of signee  
BY: HUGH B. LAZENBY  
ITS: EXECUTIVE VICE PRESIDENT

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

06 JUN - 1 AM 9:53

FILED

**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:

**ARLINGTON ROCK ISLAND, LLC**

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

C T Corporation System  
 \_\_\_\_\_  
 (Name)

1200 South Pine Island Road  
 \_\_\_\_\_  
 Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

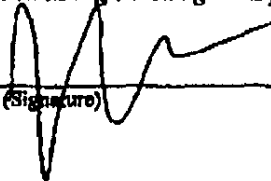
Plantation FL 33324  
 \_\_\_\_\_  
 City/State/Zip

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

06 JUN - 1 AM 9:53

FILED

*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) Jennifer F. Autron  
 Assistant Secretary

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

Nancy L. Worley  
Secretary of State

P.O. Box 5616  
Montgomery, AL 36103-5616

# STATE OF ALABAMA

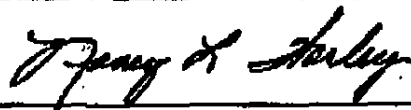
I, Nancy L. Worley, Secretary of State of the State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the domestic corporate records on file in this office disclose that Arlington Rock Island, LLC organized in the office of the Judge of Probate of Jefferson County on April 28, 2006. I further certify that the records do not disclose that said Arlington Rock Island, LLC has been dissolved.

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the City of Montgomery, on this day.

May 12, 2006

Date



Nancy L. Worley

Secretary of State

