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TALLAHASSEE, FLORIDA

mgr's name

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: High Ridge Management, L.L.C.  
(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:

Roseanne Gioedani  
(Name of Person)

N/A  
(Firm/Company)

2340 Periwinkle Way, Unit M-2  
(Address)

Sanibel, Florida 33957  
(City/State and Zip Code)

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For further information concerning this matter, please call:

TRACY Anderson at ( 512 ) 370-2740  
(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:

☒ \$125.00 Filing Fee    ☐ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy    ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 7, 2006

ROSANNE GIORDANI  
2340 PERIWINKLE WAY, UNIT M-2  
SANIBEL, FL 33957

SUBJECT: HIGH RIDGE MANAGEMENT, L.L.C.  
Ref. Number: W06000026039

We have received your document for HIGH RIDGE MANAGEMENT, L.L.C. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to list the actual name of the manager in section 9.

Please return your document, along with 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.

Diane Cushing  
Document Specialist Supervisor

Letter Number: 606A00039275

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTIONS BUSINESS IN THE STATE OF FLORIDA:

1. High Ridge Management, L.L.C.  
(Name of Foreign Limited Liability Company)
2. Alaska  
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 20-2865570  
(FEI number, if applicable)
4. April 19, 2005  
(Date of Organization)
5. Perpetual  
(Duration: Year limited liability company will cease to exist or "perpetual")
6. N/A  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 2340 Peewinkle Way, Unit M-2, Sanibel, Florida 33957  
(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:
- 2340 Peewinkle Way, Unit M-2, Sanibel, Florida 33957  
ROSEANNE GIORANNI, MANAGER (sole)

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: Company Management

Helene Gialnick  
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.)  
Helene B. Gialnick, Member  
Typed or printed name of signee

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TALLAHASSEE, FLORIDA

**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:

High Ridge Management, LLC.

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

Roseanne Gioedani  
(Name)

2340 Peewinkle Way, Unit M-2  
Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

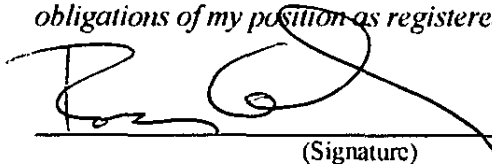
Sanibel FL 33957  
City/State/Zip

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*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)

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

Alaska Entity # 93211

**State of Alaska  
Department of Commerce, Community, and Economic  
Development**

**CERTIFICATE  
OF  
GOOD STANDING**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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THE UNDERSIGNED, as Commissioner of Commerce, Community, and Economic Development of the State of Alaska, and custodian of corporation records for said state, hereby certifies that

**HIGH RIDGE MANAGEMENT, L.L.C.**

on the 19th day of April, 2005 filed in this office its Articles of Organization for a Limited Liability Company organized under the laws of this state.

I FURTHER CERTIFY that said Limited Liability Company is in good standing, having fully complied with all the requirements of this office.

No information is available in this office on the financial condition, business activity or practices of this corporation.



IN TESTIMONY WHEREOF, I execute this certificate and affix the Great Seal of the State of Alaska on the 18th day of May, 2006.

A handwritten signature in black ink, appearing to read "William C. Noll".

William C. Noll  
Commissioner

Certification Number: 120359-1

Verify this certificate online at <https://myalaska.state.ak.us/business/soskb/verify.asp>