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PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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SECRETARY OF STATE

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: LYONS PROPERTIES, 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:					
ROBERT LEON					
(Name of Person)					
LYONS PROPERTIES, LLC					
(Firm/Company)					
P.O. BOX 27740					
(Address)					
LAS VEGAS, NEVADA 89126					
(City/State and Zip Code)					
For further information concerning this matter, please call:					
ROBERT LEON at (239) 298-2864					
(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: \$\Bigcup \text{\$125.00 Filing Fee} \Bigcup \$130.00 Filing Fee & Bigcup \text{\$\Bigcup \text{\$155.00 Filing Fee & Bigcup \text{\$\Bigcup \text{\$\text{\$\Bigcup \text{\$\Bigcup \text{\$\Bigcup \text{\$\Bigcup \text{					

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.	LYONS PROPERTIES, LLC				
	(Name of Foreign Limited Liability Company)				
	NEVADA (Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applicable)				
4.	08/09/2006 (Date of Organization) 5. 30 YEARS (Duration: Year limited liability company will cease to exist or "perpetual")				
6.	09/01/2006				
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)				
7.	101 CONVENTION CENTER DRIVE, SUITE 700				
	LAS VEGAS, NEVADA 89109				
	(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:				
	ROBERT LEON				
	P.O. BOX 27740, LAS VEGAS, NV 89126				
the	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a relation of the certificate under oath of the translator must be submitted.)				
11	. Nature of business or purposes to be conducted or promoted in Florida: REAL ESTATE				
	INVESTMENTS.				
	M				
	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.) ROBERT LEON				

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.

1. The name	of the Limited Liability Compa	iny is:	
LYONS PF	ROPERTIES, LLC		
2. The name	and the Florida street address o	f the registered agent and office	are:
	ROBERT LEON		TASE SE
		(Name)	LORGIA NO.
	5683 STRAND CT, SU	30 ARY (SSEI	
	Florida Street Addr		
	NAPLES	_{FL} 34110	5
		City/State/Zip	·
liability compo agent and agre relating to the	any at the place designated in th ee to act in this capacity. I furth proper and complete performan	accept service of process for the is certificate, I hereby accept the eer agree to comply with the province of my duties, and I am familianas provided for in Chapter 608, F	appointment as registered sions of all statutes r with and accept the

\$ 100.00 Filing Fee for Application

\$ 30.00 Certified Copy (optional)

\$ 25.00

\$ 5.00

Designation of Registered Agent

Certificate of Status (optional)

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **LYONS PROPERTIES**, **LLC**, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since August 9, 2006, and is in good standing in this state.

By

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on August 10, 2006.

DEAN HELLER Secretary of State

Certification Clerk