M06 00000 4858

(Requestor's Name)	_
(Address)	_
(Address)	_
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	_
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	7
951	
Office Use Only	



300079267333

- 09/01/06--01026--019 **160.00

SECRETARY OF STATE

-

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Spacebox Land O'Lakes, LLC			
	ited Liability Company)		
	ability Company for Authorization to Transact Business in ubmitted to register the above referenced foreign limited		
Please return all correspondence concerning this n	natter to the following:		
Mary D. Blumentritt			
(Na	t PRICE PRIC		
Jackson, Bowman & Blumentritt			
(Fi	rm/Company)		
309 South 40th Avenue	FLORITE 22		
	(Address)		
Hattiesburg, MS 39404-55	17		
(City/St	ate and Zip Code)		
For further information concerning this matter, ple	ease call:		
Mary D. Blumentritt	at (_601) 264-3309		
(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}\$125.00 Filing Fee \$\Bigsiz \frac{1}{2}\$130.00 Filing Fee & \$\Bigsiz \frac{1}{2}\$155.00 Filing Fee & \$\Bigsiz \frac{1}{2}\$160.00 Filing Fee, Certificate Copy of Status & Certified Copy			

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.	Spacebox Land O'Lakes, LLC	
	(Name of Foreign Limited Liability Company)	
۷٠	Mississippi 3. 20-4085174	
	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	
	January 11, 2006 (Date of Organization) 5. Derpetual (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) 112 Sheffield Loop Hattiesburg, MS 39402 (Street Address of Principal Office)	
7.	112 Sheffield Loop	
	Hattiesburg, MS 39402	
	(Street Address of Principal Office)	7
8.	If limited liability company is a manager-managed company, check here	77:1
9.	The name and usual business addresses of the managing members or managers are as follows:	
	Bennett V. York, 112 Sheffield Loop, Hattiesburg, MS 39402	
	Paige York-Losee, 112 Sheffield Loop, Hattiesburg, MS 39402	
	John T. York, 112 Sheffield Loop, Hattiesburg, MS 39402	
the	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in a joint properties of the certificate is in a foreign language, a instation of the certificate under oath of the translator must be submitted.)	n
1 1	1. Nature of business or purposes to be conducted or promoted in Florida: Self Storage Facility	
	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.)	
	Paige York-Losee	
	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 Company is:	
Spacebox Land O'Lakes, LLC	08
2. The name and the Florida street address of the registered agent and office are:	SEP-1
Paige York-Losee	部 早
(Name)	T

1701 South County Hwy. 393				
Florida Street Address (P.O. Box NOT ACCEPTABLE)				
Santa Rosa Beach	FL 32459			
	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 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)

State of Mississippi

Office of the Secretary of State Eric Clark, Secretary of State Jackson, Mississippi

CERTIFICATE

I, ERIC CLARK, Secretary of State of the State of Mississippi, and as such the legal custodian of the records as required by The Mississippi Limited Liability Company Act to be filed in my office do hereby certify that:

SPACEBOX LAND O' LAKES, LLC

Formed January 11, 2006

A Mississippi Limited Liability Company has filed the necessary documents in this office and has obtained a certificate of formation under the provisions of The Mississippi Limited Liability Company Act as shown by the records in this office.

That the registered office of said Limited Liability Company is located at:

309 SOUTH 40TH AVENUE PO BOX 15517 HATTIESBURG MS 39404

and that the registered agent at that address is:

BLUMENTRITT, MARY D.

I further certify that said Limited Liability Company has paid the fees for filing the above papers required by law as shown by the records of this office and that said Limited Liability Company is in good standing to do business in Mississippi at this time.

ANY OF SALES

Given under my hand and seal of office August 25, 2006

Tic Clark

ERIC CLARK Secretary of State

Certification Number: 8210505-1 · Page 1 of 1 Reference: Verify this certificate online at http://www.sos.state.ms.us/busserv/corp/verify