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SECRETARY OF STATE ON STORE OF CORPORATIONS

WOW-38949



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

September 20, 2006

LOU ANN CASSELL J & L ARBORISTS, LLC 4160 BELLFLOWER DR ALPHARETTA, GA 30005

SUBJECT: J & L ARBORISTS, L.L.C.

Ref. Number: W06000038949

SECRETARY OF STATIONS
SIGN OF CORPORATIONS
OF OCT -2 PM 3: 59

You failed to make the correction(s) requested in our previous letter.

The document must contain the name, title, and business address of each managing member or manager who will manage the foreign limited liability company in the state of Florida. Please insert "MGRM" in the title portion for each managing member and "MGR" in the title portion for each manager.

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) 245-6043.

Joey Bryan Document Specialist

Letter Number: 806A00056384



### FLORIDA DEPARTMENT OF STATE Division of Corporations

September 5, 2006

LOU ANN CASSELL J & L ARBORISTS, LLC 4160 BELLFLOWER DR ALPHARETTA, GA 30005

SUBJECT: J & L ARBORISTS, L.L.C.

Ref. Number: W06000038949

OF OCT -2 PM 3:59

We have received your document for J & L ARBORISTS, L.L.C., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$160.00.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan Document Specialist

Letter Number: 706A00053762

A September 1

, Aug 24 06 11:13a Joe Akers

950-549-3622 p.3

COVER LETTER	
TO: Registration Section Division of Corporations	i :
SUBJECT: St. LLC (Name of Limited Liability Company)	
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Busin Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limitability company to transact business in Florida.	
Please return all correspondence concerning this matter to the following:	2
Lou Ann Cassell (Name of Person)	DIVISION OF CORPORATIONS OF OLL -2 PM 3: 59
It haborists Lic	OF CORPORATIONS 1-2 PM 3:59
(Firm/Company)	3: 5
TO DE IN 18 DEIC TIC	99
(Address)	
Alpharetta, GA 30005 (City/State and Zip Code)	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Sou Ann Cassell at (770) 396-008  (Name of Person) (Area Code & Daytime Telephone Number)	
The second and the se	
MAILING ADDRESS: STREET ADDRESS: Division of Corporations Division of Corporations	
P.O. Box 6327 Clifton Building	
Tallahassee, FL 32314 2661 Executive Center Circle	
Tallahassee, FL 32301	
Enclosed is a check for the following amount:  S125.00 Filing Fee S130.00 Filing Fee & S15160.00 Filing Fee, Certificate of Status Certified Copy of Status & Certific	ite d Copy

Joe Akers

850-549-3622

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA IN COMPLIANCE WITH SECTION 608508, FLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: (Name of Foreign Limited Liability Company) 582569293 (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) (Duration: Year limited liability company will cease to 11-3-2000 (Date of Organization) exist or "perpenual") (Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability) 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:

1160 BellSlover DR Alpharetta CA 30 Alphanetta 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 conflictue is in a funcion language, a translation of the certificate under ceth of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: Tree Service. 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 penulties of perjury that the facts stated herein are true.)

> Couldn's Cassell 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:	
- U&L Arborist, LLC	·
2. The name and the Florida street address of the registered agent and office are:	OS OCT
Joe Akers	-2 -2
(Name)  10351 Walbridge St.  Florida Street Address (P.O. Box NOT ACCEPTABLE)	PM 3: 59
Pensacria FL 32534	

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.

Elzabeth Acers
(Signature)

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

Control No.

0048809

## STATE OF GEORGIA

## Secretary of State

Corporations Division
315 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

## CERTIFICATE OF

## **EXISTENCE**

I, Cathy Cox, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

## J&L ARBORISTS, L.L.C.

#### Domestic Limited Liability Company

was formed or was authorized to transact business on 11/03/2000 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 24th day of August, 2006

> Cathy Cox Secretary of State

Certification Number: 254632-1 Reference: Verify this certificate online at http://corp.sox.state.ga.us/corp/soskb/verify.asp DIVISION OF CORPORT