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TALLAHASSEF, FI ORIO



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 3, 2006

TODD RAMSTROM 3350 RIVERWOOD PARKWAY SE STE 1600 ATLANTA, GA 30339

SUBJECT: NIAGARA NATIONAL LLC

Ref. Number: W06000043350

We have received your document for NIAGARA NATIONAL LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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) 245-6851.

Gina McLeod Document Specialist

Letter Number: 606A00058542

COVER LETTER

Registration Section
Division of Corporations

TO:

(Name of	Limited Liability Company)
•••	Liability Company for Authorization to Transact Business in re submitted to register the above referenced foreign limited la
Please return all correspondence concerning th	is matter to the following:
Todd Ramstrom	
,	(Name of Person)
Cohen Pollock Merlin & S	Small, P.C.
	(Firm/Company)
3350 Riverwood Park	way, SE, Suite 1600
	(Address)
Atlanta, Georgia 3033	39
(Cit	y/State and Zip Code)
For further information concerning this matter,	please call:
Todd Ramstrom	at (770) 763-3145
(Name of Person)	(Area Code & Daytime Telephone Number)
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: ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fe	e & □\$155.00 Filing Fee & □\$160.00 Filing Fee, Certificate te of Status Certified 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. Niagara National, LLC
(Name of Foreign Limited Liability Company)
2. State of Georgia (Jurisdiction under the law of which foreign limited liability company is organized) 3. 52-0493461 (FEI number, if applicable)
4. May 23, 2006 (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. 1076 Trailridge Place, Atlanta GA 30338
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: Normal S. Kirschner, CEO - 1076 Trailridge Place, Atlanta GA 30338 Andrew I. Lasky, COO - 1076 Trailridge Place, Atlanta GA 30338
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records 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: Any lawful business or
activity under the laws of the State of Florida
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.) Ronald S. Kirschner, Chief Executive Officer

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.

 The name of the Limited Liability Col Niagara National, LLC 	mpany is:	
2. The name and the Florida street addre	ess of the registered agent and office are:	
	os or the registered agent and orner are.	
CT Corporation Sy	vstem	
	(Name)	
1200 South Pine	Island Road	
Florida Street	Address (P.O. Box NOT ACCEPTABLE)	
Plantation	_{FL} 33324	
A TO STATE OF THE	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.

ALLAN FARNELL

(Signature) 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)

Control No. 0635894

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

NIAGARA NATIONAL, LLC

Domestic Limited Liability Company

was formed or was authorized to transact business on 05/23/2006 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 11th day of September, 2006

Cathy Cox Secretary of State

Certification Number: 281438-1 Reference: Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp