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SECRETARY OF STATE
AH ASSEE, FLORIDA

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: Blue Ribbon Millworks, LLC					
(Name of Limit	ited Liability Company)				
	bility Company for Authorization to Transact Business in bmitted to register the above referenced foreign limited				
Please return all correspondence concerning this m	atter to the following:				
Cyndie Bennett					
(Na	me of Person)				
Blue Ribbon Millworks, LLC					
(Fir	m/Company)				
102 Maryland Street					
	(Address)				
Tuscumbia, AL 35674					
(City/Sta	ate and Zip Code)				
For further information concerning this matter, ple	ase call:				
Cyndie Bennett	at (256) 314-6262				
(Name of Person)	(Area Code & Daytime Telephone Number)				
MAILING ADDRESS:	STREET ADDRESS:				
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building				
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301				
Enclosed is a check for the following amount: \$125.00 Filing Fee \$ Certificate of	□\$155.00 Filing Fee & □\$160.00 Filing Fee, Certificate 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.	Blue Ribbon Millworks, LLC					
	(Name of Foreign Limited Liability Company)					
	Georgia 3. 203747732					
	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)					
4.	11/07/06 _{5.} perpetual					
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")					
6.	08/01/06					
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)					
7.	102 Maryland Street Tuscumbia AL 35674					
	SSE T					
	(Street Address of Principal Office)					
8.	If limited liability company is a manager-managed company, check here ORDER ORDER					
9.	The name and usual business addresses of the managing members or managers are as follows:					
	William R Little PO Box 177 Waycross, GA 31502					
	Michael Buono 106 N. Sewalls Point Rd Sewalls FL 34996					
	David Bennett 401 Roosevelt Ave Muscle Shoals, AL 35661					
th	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in a foreign language, a instation of the certificate is in a foreign language, a instation of the certificate under oath of the translator must be submitted.)					
11	. Nature of business or purposes to be conducted or promoted in Florida: Kitchen and Bath Cabinet					
	Sales					
	DEN PROPERTY					
	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.)					
	David Bennett					
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 Co	ompany is:		
Blue Rib	bon Millworks, LLC	<u> </u>		
2. The name	and the Florida street addr	ess of the registered	agent and office are:	
	NRAI Services, Ir	ıc.		
		(Name)		-
	2731 Executive			_
	Florida Street	Address (P.O. Box NO	[ACCEPTABLE)	
	Weston	FL	33331	<u>.</u>
		City/State/Zip		
liability comp agent and ag relating to the obligations o NRAL Se By: Amy	named as registered agent a cany at the place designated ree to act in this capacity. I e proper and complete perfo f my position as registered a will. Inc. My (Signature)	in this certificate, I he further agree to comp rmance of my duties,	ereby accept the appoints oly with the provisions of and I am familiar with a	ment as registered `all statutes nd accept the
Amy	Purdy, Assistant Secretary			

\$ 1	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. 0575150

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

BLUE RIBBON MILLWORKS, LLC

Domestic Limited Liability Company

was formed or was authorized to transact business on 11/07/2005 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 9th day of November, 2006

Cathy Cox Secretary of State

Certification Number: 388551-1 Reference: Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp