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(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
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(Document Number)	
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FLORIDA DEPARTMENT OF STATE Division of Corporations

December 6, 2006

WADE MYERS 16200 ADDISON RD., SUITE 150 ADDISON, TX 75001

SUBJECT: REAL MANAGE, LLC Ref. Number: W06000052718

We have received your document for REAL MANAGE, LLC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the original and one copy of 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) 245-6995.

Wanda Cunningham Document Specialist New Filing Section

Letter Number: 106A00069905



January 19, 2007

WADE MYERS 550 N. RED ST. TAMPA, FL 33609

SUBJECT: REAL MANAGE CORP. Ref. Number: W07000003082

We have received your document for REAL MANAGE CORP. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

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

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the original and one copy of 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) 245-6995.

Letter Number: 007A00004515

Wanda Cunningham Document Specialist New Filing Section



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 6, 2007

REALMANAGE, LLC, ATTN: WADE MYERS 16200 ADDISON RD., SUITE 150 ADDISON, TX 75001

SUBJECT: REALMANAGE, LLC Ref. Number: W06000052718

Fed Ex 3all-4082-3

Letter Number: 007A00008956

We have received your document for REALMANAGE, LLC and your check(s) totaling \$130.00. However, the document has not been filed and is being retained in this office for the following:

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper, that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

If you have any questions concerning the filing of your document, please call (850) 245-6911.

Brenda Tadlock Senior Section Administrator RealManage

Fax Cover Sheet

Date:	Annual Control of the Annual Control of the Control	2-12-07
Pages (including cover):		2
To:	Company:	State of Florida
	Name:	State of Florida Brenda Tadlock
	Fax:	850-245-6030
	Telephone:	
From:	Company:	Real Manage
	Name:	Trina Tunnell
	Fax:	866-919-5696
	Phone:	
Message:		
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COVER LETTER

ro: Registration Section Division of Corporations
SUBJECT: RealManage, 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 iability company to transact business in Florida
Please return all correspondence concerning this matter to the following:
(Name of Person)
(Name of Person)
Real Manage, LLC (Firm/Company)
16201 Addison Rd., StE. 150 (Address)
(City/State and Zip Code)
For further information concerning this matter, please call:
Nacle Must at (214) 269-2502 (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: \$\Boxed{15.00} \\$125.00 \text{ Filing Fee} \Boxed{15.00} \\$130.00 \text{ Filing Fee} \Boxed{15.00} \Boxed{15.00} \Boxed{15.00} \text{ Filing Fee} \Boxed{15.00} \Boxed{16.00} \text{ Filing Fee}, \text{ Certificate} \text{ Certified Copy} \text{ of Status & Certified Copy} of St

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Name of Foreign Limited Liability Company) Jurisdiction under the law of which foreign limited liability company is organized) (Duration: Year limited liability company will cease to (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) (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: 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 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: Kell 55th Managens Signature of a member or an authorized representative of a member. (In accordance with section 608.408(8), F.S., the execution of this document constitutes an affiguration under the penalties of perjury that the facts stated herein are true.) bed 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:	
Real Manage, LLC	_
2. The name and the Florida street address of the registered agent and office are:	
Wade Myers (Name)	DIVIS
Florida Street Address (P.O. Box NOT ACCEPTABLE)	TARY C
Tampa FL 33609 Con City/State/Zip	SIS
Having been named as registered agent and to accept service of process for the above stated limited	

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.

(Signature)

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

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT "REALMANAGE, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

THE FOLLOWING DOCUMENTS HAVE BEEN FILED:

CERTIFICATE OF FORMATION, FILED THE EIGHTEENTH DAY OF FEBRUARY, A.D. 2004, AT 2:01 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID

CERTIFICATES ARE THE ONLY CERTIFICATES ON RECORD OF THE

AFORESAID LIMITED LIABILITY COMPANY, "REALMANAGE, LLC".

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

3756106 8310 070**14**3078



Warriet Smith Windson, Secretary of State

AUTHENTICATION: 5420208

DATE: 02-08-07