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SEURETERY OF STATE
NALLAMASSEE, FLORINA

COVER LETTER

_	ration Section on of Corporations		
	•		
SUBJECT:	P & E Management, L.L.C.		
	(Name of Lim	ited Liability Company)	
Florida," Cert	"Application by Foreign Limited Lia ificate of Existence, and check are suany to transact business in Florida		
Please return	all correspondence concerning this m	atter to the following:	
	Sharon Heap		
	(Na	me of Person)	
	P & E Managen	ment, L.L.C.	ZOOT FE SECRE
	(Fir	m/Company)	A
	1394 County F	wy. 283 South Bldg. 1	Y OF S
		(Address)	2: 48
	Santa Rosa Be	each, Florida 32459	_
	(City/St	ate and Zip Code)	
For further in	formation concerning this matter, ple	ase call:	
	Sharon Heap	at (850) 231-5220	-
	(Name of Person)	(Area Code & Daytime Teleph	one Number)
MAII	ING ADDRESS:	STREET ADDRESS:	
	on of Corporations	Division of Corporations	
	3ox 6327	Clifton Building	
	assee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	
	check for the following amount: .00 Filing Fee \$\square\$\$\$\$\$130.00 Filing Fee & Certificate of	· · · · · · · · · · · · · · · · · · ·	Filing Fee, Certificate 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 FOTLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Name of Foreign Limited	Liel	aility Company	
(Name of Poleign Emilieu	Lia	only Company)	
Louisiana	3.	72-1367514	<u> </u>
(Jurisdiction under the law of which foreign limited liability company is organized)		(FEI number, if	applicable)
Incorporated - April 4, 1997			
Converted to L.L.C January 1, 2007	5.	Perpetual	
(Date of Organization)		(Duration: Year limited liabil exist or "perpetual")	ity company will cease to
January 1, 2007			
(Date first transacted business in F (See sections 608.501 & 608.502 F.)	loric S. to	la, if prior to registration.) determine penalty liability)	,
1394 County Hwy. 283 South, Bldg. 1			290 7AE
Santa Rosa Beach, Florida 32459			
(Street Address	s of	Principal Office)	85.5
If limited liability company is a manager-managed	d cc	ompany, check here	YOF SI
The name and usual business addresses of the man	nag	ing members or managers	areas follows:
John M. Poole, Managing Member		····	
1394 County Hwy. 283 South, Bldg. 1	Į		
Santa Rosa Beach, Florida 32459			
). Attached is an original certificate of existence, no more than 90 e jurisdiction under the law of which it is organized. (A photocopustation of the certificate under oath of the translator must be sub	py is omitt	not acceptable. If the certificate i ed.)	
Nature of husiness or nurnoses to be conducted or		omored in Frontia.	
	яр.		
Property Management Signature of a member or an au (In accordance with section 608.408(3), 1	utho	orized representative of a r	
Property Management Management	utho	orized representative of a re the execution of this document con	ıstitutes

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:	
	P & E Management, L.L.C.	

2. The name and the Florida street address of the registered agent and office are:

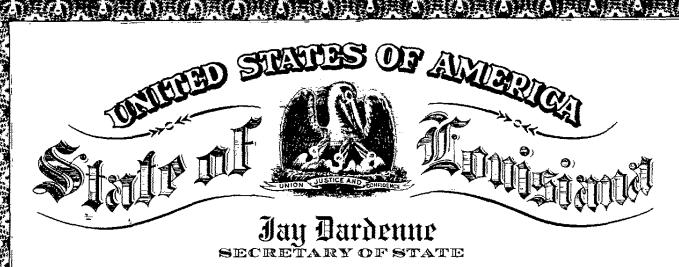
Sharon Heap	
(Name) 1394 County Hwy. 283, South, Bldg. 1	2001 FEB SECRET
Florida Street Address (P.O. Box NOT ACCEPTABLE)	TARY OF
Santa Rosa Beach, FL 32459 City/State/Zip	CORIDA STATE STATE 10 2: 48

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.

Sharon Hean

(Signature)

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



As Secretary of State, of the State of Souisiana, I do hereby Certify that the Articles of Organization of

P & E MANAGEMENT, L.L.C.

Domiciled at COVINGTON, LOUISIANA,

Were filed in this Office and a Certificate of Organization was issued on April 25, 1997,

I_further certify that no Certificate of Dissolution has been issued.

In lestimeny whereof, I have hereunle set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on, January 17, 2007

VSC 34558368K

Secretary of State

