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SECRETARY OF STATE DIVISION OF CORPORATIONS



JAMPOL • SCHLEICHER • JACOBS & PAPADAKIS • LLP ATTORNEYS AT LAW

February 16, 2007

VIA FEDERAL EXPRESS

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Re: LN GROVELAND, LLC

Dear Sir or Madam:

Enclosed herewith are the following documents in connection with the application for Authority to Transact Business in Florida for the above-referenced limited liability company:

- 1. Cover letter to Registration Section, Division of Corporations;
- 2. An original and one conformed copy of the Application for Certificate of Authority for Limited Liability Company;
- 3. Certificate of Designation of Registered Agent/Registered Office;
- .4. A Certificate of Existence from the State of Georgia; and
- 3. A check in the amount of \$130.00 made payable to the Florida Department of State for the filing fee.

Please issue a Certificate of Authority and return it in the enclosed Federal Express envelope. Your cooperation in this matter is greatly appreciated.

Very truly yours,

Michael E. Jacobs

MEJ/se Enclosures

COVER LETTER

_	stration Section ion of Corporations					
SUBJECT:	LN Groveland, LLC	**************************************				
	(Name of Lim	nited Liability Company)				
Florida," Cer		ability Company for Authorization to Transact Business in ubmitted to register the above referenced foreign limited				
Please return	all correspondence concerning this n	natter to the following:				
	Michael E. Jacobs					
	(Na	ame of Person)				
	Jampol, Schleicher, Jacobs & Papadakis, LLP					
	(Fi	rm/Company)				
	11625 Rainwater Drive, Su	ite 350				
		(Address)				
	Alpharetta, Georgia 30004					
	(City/St	tate and Zip Code)				
For further in	nformation concerning this matter, ple	ease call:				
She	rry Engle	at (_678)_222-2131				
	(Name of Person)	(Area Code & Daytime Telephone Number)				
MAI	LING ADDRESS:	STREET ADDRESS:				
Division of Corporations		Division of Corporations				
P.O. Box 6327		Clifton Building				
Talla	hassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301				
	a check for the following amount: 25.00 Filing Fee \(\sum \frac{1}{2}\\$130.00 Filing Fee & Certificate o					

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:

LN Groveland, LLC (Name of Foreign Limited	Lia	bility Company)		
State of Georgia	2	20-8446974		
Jurisdiction under the law of which foreign limited liability ompany is organized)	٥.	(FEI number, if applicable)		
February 12, 2007	5	prepetual		
(Date of Organization)	٠.	(Duration: Year limited liability company wexist or "perpetual")	ill cease t	to
No business as of this date				
(Date first transacted business in F (See sections 608.501 & 608.502 F.	lori S. to	da, if prior to registration.) o determine penalty liability)		
4475 Rivergreen Parkway, Suite 100				
Duluth, Georgia 30096				
(Street Addres	s of	Principal Office)		
If limited liability company is a manager-manage	d c	ompany, check here 🗸		
The name and usual business addresses of the ma	nag	ring members or managers are as follow	vs:	
Lee Najjar		3·8		
4475 Rivergreen Parkway, Suite 100				
Duluth, Georgia 30096				_
Attached is an original certificate of existence, no more than 90 jurisdiction under the law of which it is organized. (A photocouslation of the certificate under oath of the translator must be sufficient of business or purposes to be conducted.	py i bmi	s not acceptable. If the certificate is in a foreign litted.)	-	
		,		<u> </u>
michelE	u	oe		
Signature of a member or an a	uth F.S	orized representative of a member. the execution of this document constitutes	07	UV
Michael E. Jacobs, Attorney		· · · · · · · · · · · · · · · · · · ·	FEB	NOIS
		ame of signee	20	_

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 LN Grovela	of the Limited Liability Company is:	
2. The name a	and the Florida street address of the registered agent and office are:	
	George Shami	
	(Name)	
	3651 Rogert Road	
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	
	Jacksonville _{FL:} 32277	
	City/\$tate/2ip	

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 agregistered 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)

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DIVISION OF CORPORATIONS

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, Karen C Handel, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

LN GROVELAND, LLC

Domestic Limited Liability Company

was formed or was authorized to transact business on 02/12/2007 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 21st day of February, 2007

Karen C Handel Secretary of State

Haren CHandel

Certification Number: 793211-1 Reference: 3000-161

Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp

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SECRETARY OF STATION OF CORPORATION