# M07000001247

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cil	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
, (Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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07 MAR - 1 PH 12: 18 SECRETARY OF STATE TALLAHASSEE FLORID.

#### TRANSMITTAL LETTER

**TO:** Registration Section Division of Corporations

SUBJECT: Birmingham 19th Street, L.L.C.	
· · · · · · · · · · · · · · · · · · ·	d Liability Company)
The enclosed "Application by Foreign Limited Liabil Florida," Certificate of Existence, and check are subn liability company to transact business in Florida	ity Company for Authorization to Transact Business in nitted to register the above referenced foreign limited
Please return all correspondence concerning this matt	er to the following:
Carolyn P. Jett, Paralega	I
(Name	of Person)
	CECRA SEE
Sirote & Permutt, P.C.	HE AR
(Firm/	Company)
	HO TO THE
2311 Highland Avenue South	STA IS
(A	ddress) Qm o
Birmingham, Alabama 35205	
(City/State	and Zip Code)
For further information concerning this matter, please	e call:
Jay G. Maples	at (_205) _9305383
(Name of Person) (Area Code & Daytime Telephone Number	
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327
Tallahassee, Florida 32399	Tallahassee, Florida 32314
Enclosed is a check for the following amount:	
□ \$125.00 Filing Fee □ \$130.00 Filing Fee & Certificate of Sta	

#### 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. Birmingham	19th Street, L.L.C.			
	(Name of Foreign Limited Liability Company)			-
2. Alabama	3. 20-8406628			
(Jurisdiction u company is or	nder the law of which foreign limited liability (FEI number, if applications)	able)		_
4. <u>February 7,</u>		***	<del></del> -	_
	(Date of Organization) (Duration: Year limited liability comexist or "perpetual")	- •	ase to	
6. upon registr		SEC FALL	071	_ <b>E</b> .EUG.4
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	RETA	HAR -	
7. 135 Second	Avenue N., Suite 3	ASSE		1
Jacksonville	Beach, Florida 32250	E S.	PH 12:	in the second
	(Street Address of Principal Office)	ATE	-	- interest
R If limited 1	iability company is a manager-managed company, check here 🗸	∌m	O.	
The name a	and usual business addresses of the managing members or managers are as	follows:		
David A. Ba	all, 33 Ridge Drive, Birmingham, AL 35213			_
Michael T.	McCann, 135 Second Avenue N., Suite 3, Jacksonville Beach, FL 32250			
				-
				-
	n original certificate of existence, no more than 90 days old, duly authenticated by the official. I Inder the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a s		-	cords in
•	certificate under oath of the translator must be submitted.)	ioicigii migu	age, a	
	The state of the s			
11. Nature of	business or purposes to be conducted or promoted in Florida:	<u></u>		-
own and ma	nage real estate		_	_•
	Varl Jall			-
	Signature of a member of an authorized representative of a memb	er.		
	(In accordance with section 608.408(3), P.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)	S		
	David A. Ball, Manager			
	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 Company is:			
В	Birmingham 19th Street, L.L.C.			_
2.	The name and the Florida street address of the registered agent and office are:			
		ΓAS	0	
	Michael T. McCann		7 1	2 magas
	(Name)	HASSI	MAR	i manana Lamanana Lamanananananananananananananananananana
135 Second Avenue N., Suite 3			70	######################################
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	JISO7.	12: 15	e - Treeter
	Jacksonville Beach FL 32250	T.	U.	
	City/State/Zip	-		
lie ag re	laving been named as registered agent and to accept service of process for the above stability company at the place designated in this certificate, I hereby accept the appointing gent and agree to act in this capacity. I further agree to comply with the provisions of elating to the proper and complete performance of my duties, and I am familiar with an bligations of my position as registered agent as provided for in Chapter 608, Florida S  (Signature)	nent as `all stat nd acce	regis tutes ept the	tered
R.	(Signature)			

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

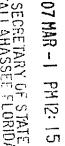
 Beth Chapman Secretary of State

P.O. Box 5616 Montgomery, AL 36103-5616

## STATE OF ALABAMA

I, Beth Chapman, Secretary of State of the State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the domestic corporate records file in this office on disclose that Birmingham 19th Street, L.L.C. organized in the office of Judge of Probate of Jefferson County on the 2007. I further certify that the records do not 7, disclose that said Birmingham 19th Street, L.L.C. has been dissolved.



annies P



In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the City of Montgomery, on this day.

February 23, 2007

Date

Beth Chapman

Beth Chapman

Secretary of State