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SECRETARY OF STATE DIVISION OF CORPORATIONS

#### **COVER LETTER**

TO: Registration Section Division of Corporations			
2son er gerpennene			
SUBJECT: Live Oak Plantation, LLC			
	me of Limited Liability Company)		
-, -	imited Liability Company for Authorization to Transact Buneck are submitted to register the above referenced foreign Florida		
Please return all correspondence concern	ning this matter to the following:		
	Kenneth Shaw		
	(Name of Person)		
	Live Oak Properties		
	(Firm/Company)	_	
	P.O. Box 772109	07 MAR	NOISIAI
	(Address)	9-	무조
	Ocala, FL 32608	88 88	CORPORATIONS
	(City/State and Zip Code)	8: 2	ATTO:
For further information concerning this r	matter, please call:		tr
Kenneth Shaw	at ( 352 ) 622-4156		
(Name of Person)	(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 am			

### 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:

. Live Oak Plantation, LLC (Name of Fo	oreign Limited Liability Company)	
Delaware (Jurisdiction under the law of which foreign licompany is organized)	mited liability (FEI number, if applicable)	
12/29/2006 (Date of Organization)	5. Perpetual  (Duration: Year limited liability company will cease to exist or "perpetual")	
N/A (Date first transacte	d business in Florida, if prior to registration.)	
(See sections 608.501  Corporation Trust Center 1209 Ora	& 608.502 F.S. to determine penalty liability)	
Wilmington, DE 19801		
	(Street Address of Principal Office)	
. If limited liability company is a mana	ger-managed company, check here ✓	
. The name and usual business address	es of the managing members or managers are as follows:	
Charlotte Weber, 7340 N.W. US Hwy		
	2	
	no more than 90 days old, duly authenticated by the official having custody of reed. (A photocopy is not acceptable. If the certificate is in a foreign language, a ator must be submitted.)	
1. Nature of business or purposes to be	conducted or promoted in Florida: Thoroughbred Racing	

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.

Live Oak Pla	tation, LLC	·
2. The name and	d the Florida street address of the registered agent and office	are:
	CT Corporation System	07 07
	(Name)	O7 MAR
	1200 South Pine Island Road	R L 6
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	<del></del>
	Plantation FL, 33324	æ Ž
•	City/State/Zip	

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.

Peter F. Souza
Assistant Secretary
(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

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#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LIVE OAK PLANTATION, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWELFTH DAY OF FEBRUARY, A.D. 2007.

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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Darriet Smith Hindron

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5427322

DATE: 02-12-07