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TALLAHASSEE FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Spacebox Dover, 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 liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Mary Dever Blumentritt

(Name of Person)

Jackson, Bowman & Blumentritt, PLLC

(Firm/Company)

P. O. Box 15517

(Address)

Hattiesburg, MS 39404-5517

(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Mary D. Blumentritt

(Name of Person)

at (601) 264-3309

(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:

☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

JACKSON, BOWMAN & BLUMENTRITT, PLLC

ATTORNEYS AT LAW
309 SOUTH 40TH AVENUE
HATTIESBURG, MISSISSIPPI 39402

ROBERT T. JACKSON, SR.
ROBERT T. JACKSON, JR.
MARY DEVER BLUMENTRITT
JEFF CORBETT BOWMAN
JOHN BRIAN JONES*
JOHN M. MILLER, II**

MAILING ADDRESS:
P. O. BOX 15517
HATTIESBURG, MS 39404-5517

March 19, 2007

*Also licensed in Tennessee
**Only licensed in Delaware

TELEPHONE: (601) 264-3309
FACSIMILE: (601) 264-6044
E-mail: maryl@jacksonfirm.com

Florida Department of State
Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

RE: Spacebox Apopka, LLC; Spacebox Dover, LLC

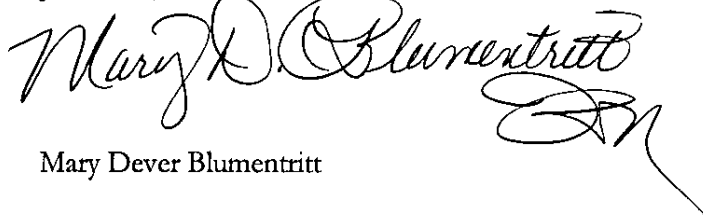
To Whom It May Concern:

Pursuant to your letter dated February 19, 2007, a copy of which is enclosed, please find enclosed herewith Certificate of Good Standing obtained from the Mississippi Secretary of State's Office with regard to the above-referenced entities.

Of course, please do not hesitate to contact me if you have any questions or would like to discuss this matter in further detail. Thank you for your assistance.

Very truly yours,

JACKSON, BOWMAN & BLUMENTRITT, PLLC


Mary Dever Blumentritt

MDB:kn
Enclosures

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TALLAHASSEE FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 19, 2007

MARY DEVER BLUMENTRITT
JACKSON, BOWMAN & BLUMENTRITT, PLLC
P.O. BOX 15517
HATTIESBURG, MS 39404-5517

SUBJECT: SPACEBOX DOVER, LLC
Ref. Number: W07000008475

We have received your document for SPACEBOX DOVER, LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

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 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) 245-6984.

Deborah Bruce
Document Specialist

Letter Number: 407A00012122

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTIONS BUSINESS IN THE STATE OF FLORIDA:

1. Spacebox Apopka, LLC
(Name of Foreign Limited Liability Company)

2. MS 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 12/15/2006 5. _____
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")

6. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. 112 Sheffield Loop, Hattiesburg, Mississippi 39402
(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:
Bennett V. York, Mgr./Member, 112 Sheffield Loop, Hattiesburg, MS 39402
Bennett V. York, Jr., Member, 112 SHEffield Loop, Hattiesburg, MS 39402
Paige York-Losee, Member, 112 Sheffield Loop, Hattiesburg, MS 39402

John T. York, Member, 112 Sheffield Loop, Hattiesburg, MS: 39402
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: Acquisition, construction, development, improvement, ownership, lease, management, operation, marketing, sale and disposal of certain property in Apopka, FL.

Paige York-Losee
Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Paige York-Losee
Typed or printed name of signee

07 MAR 22 PM 4:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

State of Mississippi

Office of the Secretary of State

Eric Clark, Secretary of State
Jackson, Mississippi

CERTIFICATE

I, ERIC CLARK, Secretary of State of the State of Mississippi, and as such the legal custodian of the records as required by The Mississippi Limited Liability Company Act to be filed in my office do hereby certify that:

SPACEBOX APOPKA, LLC

Formed December 15, 2006

A Mississippi Limited Liability Company has filed the necessary documents in this office and has obtained a certificate of formation under the provisions of The Mississippi Limited Liability Company Act as shown by the records in this office.

That the registered office of said Limited Liability Company is located at:

309 SOUTH 40TH AVENUE
P O BOX 15517
HATTIESBURG MS 39404

and that the registered agent at that address is:

BLEMENTRITT, MARY DEVER

I further certify that said Limited Liability Company has paid the fees for filing the above papers required by law as shown by the records of this office and that said Limited Liability Company is in good standing to do business in Mississippi at this time.



Given under my hand
and seal of office
March 19, 2007

Eric Clark

ERIC CLARK
Secretary of State

07 MAR 22 PM 4:56
SECRETARY OF STATE
TALLAHASSEE FLORIDA

**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:

Spacebox Apopka, LLC

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

Paige York-Losee

(Name)

1701 South County Hwy. 393

Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Santa Rosa Beach, FL 32459

City/State/Zip

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TALLAHASSEE FLORIDA

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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)