M07000003639

<u> </u>	(Requestor's Name)
•	(Address)	
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	(City/State/Zip/Phor	ne #)
PICK-L	JP 🔲 WAIT	MAIL
	(Business Entity Na	ime)
	(Document Number	·)
Certified Copies	Certificate	es of Status
Special Instruction	ns to Filing Officer:	
	Certificate	

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)7 JUN 15 PM 12:51 SECRETARY OF STATE ALL AHASSEF FLORIDA

COVER LETTER

TO:	Registration Section		
	Division of Corporations		
SUBJI	ECT: 8133 Hwy 98, St. Joe B	each, FL, LLC	
	(1)	Name of Limited Liability Company)	
Florida		Limited Liability Company for Authorization to Transact Busin check are submitted to register the above referenced foreign limin Florida	
Please	return all correspondence conc	erning this matter to the following:	
	Jill Mutka		
		(Name of Person)	
	ITA Implementation	Services, LLC	
		(Firm/Company)	
	1275 Barclay Blvo	1	
		(Address)	
	Buffalo Grove, IL	60089	
		(City/State and Zip Code)	
For fu	rther information concerning th	is matter, please call:	
	MICRA AL	000 505 4470	
	Jill Mutka	at (800) 595-4176 (Area Code & Daytime Telephone Number)	
	(Name of Perso	(Area Code & Daytime Telephone Number)	
س	MAILING ADDRESS: Division of Corporations P.O. Box 6327	STREET ADDRESS: Division of Corporations Clifton Building	
	Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	
Enclos	sed is a check for the following \$125.00 Filing Fee \$130.00	amount: D Filing Fee & \$\sum \$155.00 \text{ Filing Fee & }\sum \$160.00 \text{ Filing Fee, Certific Copy} \text{ of Status & Certific Copy}	



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 4, 2007

JILL MUTKA 1275 BARCLAY BLVD. BUFFALO GROVE, IL 60089

SUBJECT: 8133 HWY 98 ST. JOE BEACH FL LLC

Ref. Number: W07000026462

We have received your document for 8133 HWY 98 ST. JOE BEACH FL 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) 245-6067.

Neysa Culligan Document Specialist

Letter Number: 707A00038077

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

IN I IN	COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED ITTED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	TO REGISTER A FO	REKG
	8133 Hwy 98, St. Joe Beach, FL, LLC		
1	(Name of Foreign Limited Liability Company)		
~ (Georgia 3 20-8911245		
Ť	Jurisdiction under the law of which foreign limited liability (FEI number, if applionipany is organized)	cable)	
1	4/23/07 ₅ perpetual		
ᅻ.	(Date of Organization) (Duration: Year limited liability coexist or "perpetual")	mpany will cease to	
۲.	4/23/07		
υ.	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	O7 J SECT	
7.	8133 Highway 98, Unit A (lower unit)	ARCH ARCH	71
•		S S U	=
	Port St. Joe, FL 32456	Fig. 79	ED
	(Street Address of Principal Office)	FS	_
8.	If limited liability company is a manager-managed company, check here	PH 12: 5	
		A	
9.	The name and usual business addresses of the managing members or managers are a	s follows:	
	Floyd Shiffman 1272 Old Alpharetta Road; Alpharetta, GA 30005- member		
	Barbara Shiffman 1272 Old Alpharetta Road; Alpharetta, GA 30005- member		
	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official		ords in
	urisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a slation of the certificate under eath of the translator must be submitted.)	i foreign language, a	
120 6	skillori of the certificial cultion are translation tries of submittees,		
۱.	Nature of business or purposes to be conducted or promoted in Florida: to hold pr	operty	
	Λ		
-		·	
	Thord Ship		
	Signature of a member or an authorized representative of a mem		
	(In accordance with section 608.408(3), F.S., the execution of this document constitute an affirmation under the penalties of perjury that the facts stated herein are true.)	ės I	
	Floyd Shiffman		
	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	1.	The name	of the	Limited	Liability	y Company	is
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8133 Hwy 98, St. Joe Beach, FL, LLC.

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

Floyd Shiffman	4	TASE S
	L CREATE FI	
8133 Highway 98, U	ISS IS	
Florida Street A	E GF RSI	
Port St. Joe	FL 32456	왕 5
	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.

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

Control No. 07034533

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

8133 HWY 98 ST JOE BEACH FL, LLC

Domestic Limited Liability Company

was formed or was authorized to transact business on 04/23/2007 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 12th day of June, 2007

Karen C Handel Secretary of State

Haven C. Handel

Certification Number: 1466302-1 Reference: Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp