M070006240					
(Requestor's Name) (Address)					
(Address) (City/State/Zip/Phone #)	900110437929				
(Business Entity Name) (Document Number)	RECEIVED 07 OCT 18 PH 12: 25 04112 St. C. FLORIDO				
Certified Copies Certificates of Status	FLOORIDANS				
Office Use Only	FILED 07 OCT 18 PH 1: 37 SECRE TARY OF STATE TALLAHASSEE, FLORIDA				

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# FLORIDA FILING & SEARCH SERVICES, ING P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Drive, Suite A Tallahassee, FL 32301 PHONE: (850) 216-0457; FAX: (850) 216-0460

DATE: 10-18-07

NAME: REGAN WARD PROPERTIES, LLC

**TYPE OF FILING: APPLICATION TO TRANSACT BUSINESS** 

COST: \$125

**RETURN:** 

ACCOUNT: FCA000000015

AUTHORIZATION:

ABBIE/PA

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

#### IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	egan Ward Properties LLC	
	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "L.L.C.,"

2.	Georgia	3.	26-1251794		
	(Jurisdiction under the law of which foreign limited liability company is organized)	•••	(FEI number, if applicable)		
4.	August 7, 2007	5.	Perpetual		
	(Date of Organization)		(Duration: Year limited liability company will cease to exist or "perpetual")		
6.			TAL	-	
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)					
7.	1330 Warwick Highway		S S S S S S S S S S S S S S S S S S S	177	
	Ashburn, GA 31714		Fio	50	
	(Street Addres	S 01	Principal Office)	ι. L	
8.	If limited liability company is a manager-manager	d c	ompany, check here 🗹		
9.	The name and usual business addresses of the man	nag	ing members or managers are as follows:		
	Jimmie Ann Ward				
	1330 Warwick Highway				
	Ashburn, GA 31714				

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 each of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: Ownership of hotel

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.) J. Parker Gilbert

Typed or printed name of signce

### 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:

#### **Regan Ward Properties LLC**

If name unavailable, the alternate name to be used in the state of Florida is:

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

NRAI Services, Inc.

(Name)

2731 Executive Park Drive, Suite 4 Florida Street Address (P.O. Box NOT ACCEPTABLE)

Weston FL 33331 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. NRAI Services, Inc.

Charle Cost By:

(Signature) Charles Coyle - Assistant Secretary

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

Control No. 07067170

## 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 scal of my office that

### **REGAN WARD PROPERTIES LLC**

#### Domestic Limited Liability Company

was formed or was authorized to transact business on 06/07/2007 in Georgiz. 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 cortificate 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 discolve, 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 11th day of October, 2007

fann C. Handel

Karen C Handel Secretary of State

Certification Number: 1703971-1 Rethenon: 2754.5 Verify this certificate online at http://corp.sus.sizie.yz.us/corp/sosith/verify.sop