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(Requestor's Name)
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(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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Fictitious Name

Reinstatement

Name Reservation

UCC FILING & SEARCH SERVICES, INC. 1574 Village Square Blvd Ste 100 Tallahassee, Florida 32309 (850) 681-6528 P

HOLD FOR PICKUP BY **UCC SERVICES** OFFICE USE ONLY

CORPORATION NAME (S) AND DOCUMENT

Eagles Point Ventures, LLC

	To in
Filing Evidence □ Plain/Confirmation Cop	Type of Document
□ Certified Copy	□ Certificate of Good Standing
,	□ Articles Only
Retrieval Request □ Photocopy □ Certified Copy	 □ All Charter Documents to Include Articles & Amendments □ Fictitious Name Certificate □ Other
NEW FILINGS	AMENDMENTS
Profit	Amendment
Non Profit	Resignation of RA Officer/Director
Limited Liability	Change of Registered Agent
Domestication	Dissolution/Withdrawal
Other	Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Reports	Foreign

X

Limited Liability

Reinstatement

Trademark

Other

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:

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE S.	IALEOF FLORIDA:
1. EAGLES POINT VENTURES, 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 consent of the managers or managing members adopting the altern Company," "L.L.C.," "LLC.")	of transacting business in Florida and attach a copy of the written ate name. The alternate name must include "Limited Liability
	26-1260747
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
7, 5 5 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	Perpetual (Duration: Year limited liability company will cease to exist or "perpetual") da, if prior to registration.)
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6. N/A	To is
(Date first transacted business in Flor (See sections 608.501 & 608.502 F.S. to	
7. 11766 Wilshire Boulevard, Suite 1450	7
Los Angeles, California, 90025	
(Street Address of	Principal Office)
8. If limited liability company is a manager-managed c	ompany, check here
9. The name and usual business addresses of the management	ging members or managers are as follows:
c/o JRK Asset Management, Inc.	
11766 Wilshire Boulevard, Suite 1450	
Los Angeles, California 90025	*
10. Attached is an original certificate of existence, no more than 90 da the jurisdiction under the law of which it is organized. (A photocopy translation of the certificate under oath of the translator must be submi	
11. Nature of business or purposes to be conducted or	promoted in Florida: Owner of Commercial
Real Property in the County of Hillsbor	
Signature of a member or an aut	orized representative of a member.
an affirmation under the penalties of perjur	
CHRISTOPHER P. CAI	
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	f Liability Company is:	
Eagles Point Ventur	es, LLC	
If name unavailable, the alt	ernate name to be used in the state of Florida is:	
2. The name and the Florid	la street address of the registered agent and office are:	
Nationa	l Registered Agents, Inc.	
	(Name)	
2731 Executive Park Drive, Suite 4		
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Weston	, FL 33331 _{FL}	
	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.

mature) Assist. Scty.

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)



PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "EAGLES POINT VENTURES, 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 THIRD DAY OF OCTOBER, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "EAGLES POINT VENTURES, LLC" WAS FORMED ON THE THIRD DAY OF OCTOBER, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

4434450 8300 071081666



Warriet Smith Windson, Secretary of State

AUTHENTICATION: 6048415

DATE: 10-03-07