# M07000006397

(	Requestor's Name)			
(	Address)			
(.	Address)			
(	City/State/Zip/Phone #)			
PICK-UP	WAIT MAIL			
(	Business Entity Name)			
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions	to Filing Officer:			





800106966908

RECEIVED
OT OCT 26 AM IO: 41
OT OCT 26 AM IO: 41
OT OCT 26 AM IO: 41

O7 OCT 26 PM 1:23
SECRETARY OF STATE
TALLAHASSEF F STATE



ACCOUNT NO. : 072100000032						
REFERENCE : 289891 7165873 7						
AUTHORIZATION: Spelle Reas 3, 3						
COST LIMIT : \$ 125.00						
ORDER DATE : October 25, 2007						
ORDER TIME : 4:27 PM						
ORDER NO. : 289891-005						
CUSTOMER NO: 7165873						
FOREIGN FILINGS						
NAME: NTF, L.L.C.						
XXXX QUALIFICATION (TYPE: <u>LL</u> )						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
XX PLAIN STAMPED COPY						
CONTACT PERSON: Amanda Roath EXT# 2955						

EXAMINER:

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

N CONTENTION OF WITH SECTION MASSIS, PLONIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER A POREIG IMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
NTF, L.L.C.
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L. L. C.," or "L. L. C.")
If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the writte consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L. L.C.," "LL.C.")
Delaware 3 26-0739853
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
8-10-07 perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
upon qualification
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608 502 F S to determine penalty liability)
(See sections 608.501 & 608 502 F S to determine penalty liability)  220 W. Garden Street, Suite 401
Pensacola, FL 32502
(Street Address of Principal Office)
If limited liability company is a manager-managed company, check here
The name and usual business addresses of the managing members or managers are as follows:
Howard Zoromsky, 220 W. Garden Street, Suite 401, Pensacola, FL 32502
W.K. Whitesell, Jr., P.O. Box 2849, Pensacola, FL 32513
O Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in ne jurisoliction under the law of which it is organized (A photocopy is not acceptable. If the certificate is in a foreign language, a anslation of the certificate under oath of the translator must be submitted.)
1 Nature of business or purposes to be conducted or promoted in Florida:
Acquire, develop, finance and hold real estate projects and all other lawful activities.
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)
Howard Zoromsky/Randall D. Gibson

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	of the Limited Liability C	Company is:	
NTF, L.L.C.			
If name unava	ilable, the alternate name	e to be used in the state of Florida is:	
2. The name a	and the Florida street add	ress of the registered agent and office are:	
	Corporation Servic	е Сотрапу	
		(Name)	
	1201 Hays Street		_
	Florida Stree	et Address (PO Box NOT ACCEPTABLE)	
	Tallahassee	<sub>FL</sub> 32301	<del>-</del>
		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.

Corporation Service Company

BV: Acqueline N. Casper, Asst. VP

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

\$ 5.00 Certificate of Status (optional)

PAGE

## Delaware

#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NTF, L.L.C." 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 TWENTY-FIFTH DAY OF OCTOBER, A.D. 2007.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NTF, L.L.C." WAS FORMED ON THE TENTH DAY OF AUGUST, A.D. 2007.

AYS OF A STATE OF A ST

Warnet Smith Windson Harriet Smith Windson, Secretary of State

AUTHENTICATION: 6105974

DATE: 10-25-07

4405354 8300

071155583