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| PICK-UP                 | ☐ WAIT             | MAIL          |
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| Certified Copies        | Certificates       | s of Status   |
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| Special Instructions to | Filing Officer:    |               |
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#### **COVER LETTER**

| TO: Registration Section Division of Corporations  |   |  |  |  |
|--|---|--|--|--|
| SUBJECT: M T Pasco Management, L.L.C.  |   |  |  |  |
| (Name of   | f Limited Liability Company)  |  |  |  |
|  | ed Liability Company for Authorization to Transact Business in are submitted to register the above referenced foreign limited ida |  |  |  |
| Please return all correspondence concerning t  | his matter to the following:  |  |  |  |
| Michael Boesch   |   |  |  |  |
|  | (Name of Person)  |  |  |  |
| <del> </del>   | (Firm/Company)  |  |  |  |
| 2536 Countryside B   | Blvd. 6th Flr   |  |  |  |
|  | (Address)   |  |  |  |
| Clearwater FL 3376   | 3 <u>≥</u> ∞ o  |  |  |  |
|  | ity/State and Zip Code)   |  |  |  |
| For further information concerning this matter   | ity/State and Zip Code)  r, please call:  at (727) 726-0726  (Area Code & Daytime Telephone Number)                               |  |  |  |
| Michael Boesch   | at (727_) 726-0726  |  |  |  |
| (Name of Person)   | (Area Code & Daytime Telephone Number) 25   |  |  |  |
| MAILING ADDRESS:   | STREET ADDRESS:   |  |  |  |
| Division of Corporations   | Division of Corporations  |  |  |  |
| P.O. Box 6327  | Clifton Building  |  |  |  |
| Tallahassee, FL 32314  | 2661 Executive Center Circle Tallahassee, FL 32301  |  |  |  |
| Enclosed is a check for the following amount:  \$\Bigcup \frac{1}{30.00} \text{ Filing Fee}  \Bigcup \frac{1}{30.00} \text{ Filing Fee}  \text{Certific} |   |  |  |  |

### 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:

| 1. N         | / T Pasco Management, L.L.C.  (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")   |               |
|--------------|--|---------------|
|              | (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")   |               |
| conse        | ame unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the writtent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability pany," "L.L.C.," "LLC.")  | en            |
| 2. D         | elaware 3.   |               |
| (Ju          | risdiction under the law of which foreign limited liability (FEI number, if applicable) mpany is organized)  |               |
| 4 N          | November 26, 2007 <sub>5.</sub> Perpetual  |               |
| <u>-</u>     | (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")   |               |
| 6.           |  |               |
| J            | (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)  |               |
| 7 2          | 2536 Countryside Blvd, 6th Flr., Clearwater FL 33763   | <b>!</b><br>( |
| <i>'</i> · - | TANK TO SEC.   |               |
| _            | (Street Address of Principal Office)   |               |
| 8. It        | f limited liability company is a manager-managed company, check here   |               |
| 9. T         | The name and usual business addresses of the managing members or managers are as follows:  |               |
| 1            | Michael Boesch, 2536 Countryside Blvd. 6th Flr Clearwater FL 33763   |               |
| -            | Γimothy North, 2536 Countryside Blvd. 6th Flr Clearwater FL 33763  |               |
| the ju       | attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records risdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a ation of the certificate under oath of the translator must be submitted.) | in            |
| 11.          | Nature of business or purposes to be conducted or promoted in Florida:   |               |
| F            | Property Management  |               |
|              |  |               |
|              | 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.)   |               |
|              | Michael R. Boesch  |               |

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:                                   |                |
|--|----------------|
| M T Pasco Management, L.L.C.   |                |
| 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: | 07 DEC         |
| MICHAEL BOESCH:  | 多いに            |
| 2536 Countryside Blvd. 6th Flr Florida Street Address (P.O. Box NOT ACCEPTABLE)    | ED<br>PH 1: 05 |
| Clearwater 33763 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.

(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

# Delaware

PAGE 1

#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "M T PASCO MANAGEMENT, 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-SIXTH DAY OF NOVEMBER, A.D. 2007.

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Harriet Smith Windsor, Secretary of State **AUTHENTICATION:** 6182803

DATE: 11-26-07

You may verify this certificate online at corp. delaware.gov/authver.shtml