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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: JASELV, LLC	
(Name of Lim	ited Liability Company)
	bility Company for Authorization to Transact Business in ibmitted to register the above referenced foreign limited
Please return all correspondence concerning this m	natter to the following:
Matthew I. Van Horn	
(Na	me of Person)
Law Office of Matthew I. Va	an Horn, PLLC
(Fir	m/Company)
16 Most Martin Street	
16 West Martin Street	(A.11)
	(Address)
Raleigh, NC 27601	
. (City/Sta	ate and Zip Code)
For further information concerning this matter, plea	ase call:
<i>2</i> /1	
Matthew I. Van Horn	at (919) 835-0880
(Name of Person)	(Area Code & Daytime Telephone Number)
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: [\$\sqrt{125.00}\$ Filing Fee \text{ \$\sqrt{25.00}\$ Filing Fee \text{ \$\cdot Certificate of }\text{ \$\cdot Certificate of }\text{ \$\sqrt{25.00}\$ Filing Fee \text{ \$\cdot Certificate of }\text{ \$\cdot Certificate of } \$\cdo	\$155.00 Filing Fee & \$\Bigsim \$160.00 Filing Fee, Certificate Status Certified Copy of Status & Certified Copy

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. JASELV, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LL	C.")	-
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a co consent of the managers or managing members adopting the alternate name. The alternate name must include "Limit Company," "L.L.C.," "LLC.")		
2. North Carolina 3. 26-1369551		
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)		_
4. November 7, 2007 5. Perpetual		
(Date of Organization) (Duration: Year limited liability company will exist or "perpetual")	cease to	
6. December 3, 2007		
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)		_
7. 16 West Martin Street, Suite 700		
Raleigh, NC 27601	07	_S
(Street Address of Principal Office)	DE C	SION SION
8. If limited liability company is a manager-managed company, check here	သ	TARN PF C
9. The name and usual business addresses of the managing members or managers are as follows:	AM 10: 21	ED VELS ORPOR
John Michael Elvington): 24	ATTO:
1809 East Broadway, Suite 185		T (S)
Oviedo, FL 32765		_
 Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having cust the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign lang translation of the certificate under oath of the translator must be submitted.) Nature of business or purposes to be conducted or promoted in Florida: Real Estate Inventory. 	guage, a	
		_•
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.)		

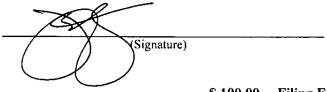
Typed or printed name of signee

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:	
JASELV, 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:	
John Michael Elvington	
(Name)	
1809 East Broadway, Suite 185	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Oviedo (32765) 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.



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



NORTH CAROLINA Department of The Secretary of State

CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

JASELV, LLC

is a limited liability company duly formed under the laws of the State of North Carolina, having been formed on the 7th day of November, 2007, with its period of duration being Perpetual.

I FURTHER certify that the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act; and that the said limited liability company has not filed articles of dissolution as of this date of this certificate.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 29th day of November, 2007

Elaine J. Marshall

Secretary of State