M0700007437

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	=
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	_	

Office Use Only



600113130086

12/20/07--01019--019 **160.00

OT DEC 20 PM 12: L9
SECRETARY OF STATE
AND ANASSEE, FLORIDA

12/20

COVER LETTER

TO:

TO: Registration Section Division of Corporations		
SUBJECT: ROI Rowan Investment (Name of Limit	, LLC ited Liability Company)	_
The enclosed "Application by Foreign Limited Lial Florida," Certificate of Existence, and check are su liability company to transact business in Florida		
Please return all correspondence concerning this m	atter to the following:	
Janett Pascul		
(Na	me of Person)	
		07 181 181
ETR Management, Inc.		LCR PR
	m/Company)	C 20
Ç		SER O
12855 SW 132 Street S	Suite 200	PM 12: 49 OF SHATE
	(Address)	LATE.
Miami, Florida 33186		
	ate and Zip Code)	
For further information concerning this matter, plea	ase call:	
Janett Pascul	at (305) 969-4312	
(Name of Person)	(Area Code & Daytime Telephon	ne 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: \$\sum_\$125.00 Filing Fee \$\sum_\$130.00 Filing Fee & Certificate of		ling Fee, Certificate f 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. ROI Rowan Investment, 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 writter consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")
2. North Carolina (Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applicable)
4. 11/08/07 (Date of Organization) 5. perpetual (Duration: Year limited liability company will cease to exist or "perpetual")
6. 11/08/07 (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 12855 SW 132 Street Suite 200 Miami, Florida 33186 28 2
(Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here
9. The name and usual business addresses of the managing members or managers are as follows: ROI Asset Management, Inc.
12855 SW 132 Street Suite 200 Miami, Florida 33186
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 oath of the translator must be submitted.)
11. Nature of business or purposes to be conducted of promoted in Florida:
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.) Eric T. Reardon 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:		
ROI Rowan Investment, LLC		
If-name unavailable, the alternate name to be used in the state of Florida is:		
	TAS O	
2. The name and the Florida street address of the registered agent and office are:	DEC 20 CRETAR LAHASS	12 mm
Eric T. Reardon	元 是	
(Name)	PH 12: 1.9 OF STATE EE, FLORID	
12855 SW 132 Street Suite 200 Florida Street Address (P.O. Box NOT ACCEPTABLE)	2: 1.9 STATE LORIDA	•
Miami, Florida 33186 FL City/State/Zip	-	
Having been named as registered agent and to accept service of process for the above st liability company at the place designated in this certificate, I hereby accept the appointn agent and agree to act in this capacity. Pfurther agree to comply with the provisions of relating to the proper and complete performance of my diffies, and I am familiar with an obligations of my position as registered agent as provided for in Chapter 608, Florida St. (Signature)	nent as regis all statutes nd accept the	tered

Filing Fee for Application

Certified Copy (optional)

Designation of Registered Agent

Certificate of Status (optional)

\$ 100.00

\$ 25.00

\$ 30.00

5.00



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

ROI ROWAN INVESTMENT, LLC

is a limited liability company duly formed under the laws of the State of North Carolina, having been formed on the 8th 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 4th day of December, 2007

Secretary of State

Elaine I. Marshall

Certification# 87312139-1 Reference# 8885122-ea Page: 1 of 1 Verify this certificate online at www.secretary.state.nc.us/verification