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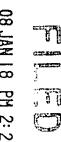
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SECRETARY OF STATE ALLAHASSEE FLORIDA





FLORIDA DEPARTMENT OF STATE Division of Corporations

January 7, 2008

JAMES B. STEWART 603 E. WALKER AVENUE FOLEY, AL 36535

SUBJECT: JAMES B. STEWART LLC

Ref. Number: W0800000740

We have received your document for JAMES B. STEWART LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the name, title, and business address of each managing member or manager who will manage the foreign limited liability company in the state of Florida. Please insert "MGRM" in the title portion for each managing member and "MGR" in the title portion for each manager.

Corporation may file listing on the corporate name delete any reference to the DBA name in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan Document Specialist

Letter Number: 608A00001127

faxing form 1/18/08

COVER LETTER

TO: Registration Section
Division of Corporations

| | | | • | | | | | • |
|---------------------------------------------------------------------------|-----------------------------------------------|-----------------------|-----------------------------------------------------|-----------------------------------------------------------------------------------------|-----------------------------------|----------------------------|-----------------------------------|------------------------------|
| SÙBJECT: | JAMES | B. | STEWAR | 7 LLC ted Liability Con | 031 | CRAZY | HURSE | CAFE |
| | | | (Name of Limi | ted Liability Con | npany) | | | |
| Florida," Cert | • • | ence, a | ind check are su | bility Company fo bmitted to registe | | | | |
| Please return all correspondence concerning this matter to the following: | | | | | | | | |
| | JAMES | ś | B. 5786 (Nai | war7 ne of Person) | | | | |
| | JAMES | <i>B</i> . | 57EWA (Fire | 27 LLC n/Company) | 031 | CRAZY | HORSE (| CAFE |
| 603 E. WALKER AUE. (Address) | | | | | | | | |
| | | | (| (Address) | | | | |
| FOLEY, 12 36535 (City/State and Zip Code) | | | | | | | | |
| For further information concerning this matter, please call: | | | | | | | | |
| _ <i>J</i> / | Amb S. (Name | <i>571</i> e of Pe | WART rson) | _at (<u>25/</u>) (Area Code & | <u>981-</u> & Daytime T | <i>8910</i> Felephone N | <u>or</u> 25, Number) | : 6(L 1-752-17 6 2 |
| MAII Divisi P.O. E | on of Corporati lox 6327 assee, FL 3231 | SS: ions | | STREET ADD Division of Corp Clifton Building 2661 Executive Tallahassee, FL | RESS: porations Center Circ | | | |
| | check for the fo | ollowir □\$130 | ng amount: 9.00 Filing Fee & Certificate of S | \$155.00 Filing Status Certif | Fee & □\$ ied Copy | | Fee, Certifica itus & Certifie | |

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

| | OMPLIANCE WITH SECTION 608:503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REG TED LIABILITY COMPANY TO TRAMSACT BUSINESS IN THE STATE OF FLORIDA: | ister 2 | A FOREI |
|-----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|---------------|
| | JAMES B. STEWART LLC | | |
| • | TAMES B. STEWART LLC. (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "I | LLC.") | |
| nse | me unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a nt of the managers or managing members adopting the alternate name. The alternate name must include "Liany," "L.L.C.," "LLC.") | | |
| (Ju | A CA BAMA risdiction under the law of which foreign limited liability (FEI number, if applicable) | | |
| | 12-04-07 (Date of Organization) 5. PERPET U1L (Duration: Year limited liability company wexist or "perpetual") | ill cease | to |
| _ | (Date first transacted business in Florida, if prior to registration.) | · · · · · · · · · · · · · · · · · · · | |
| | (See sections:608.501 & 608.502 F.S. to determine penalty liability) | | |
| | 7.61 HALCYON CIRCLE. | 7 6- | _ |
| | PENSACOLA F-L- 32506 (Street Address of Principal Office) | ECR LLA | NAT 8 |
| | (Street Address of Principal Office) | 5 7 | |
| If | limited liability company is a manager-managed company, check here | RY O | 8 PH |
| | he name and usual business addresses of the managing members or managers are as follow | F S 1/2 | $\ddot{\sim}$ |
| | JAMES B. STEWART | | 23 |
| _ | 603 E. WALKER AUE- | **** | ··· |
| _ | FOLEY, AL. 3E535 | | |
| jur | trached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having or isoliction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign lation of the certificate under oath of the translator must be submitted.) | | |
| . 1 | Nature of business or purposes to be conducted or promoted in Florida: | tN7 | |
| | James B Stewn | | · |
| | Signature of a member or an authorized representative of a member. (Le 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.) | | |
| | JAME: B. STEWART | | |

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: | |
|------------------------------------------------------------------------------------|-----------------------------|
| JAMES B. STEWART 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: | |
| JAMES B. STEWART (Name) | 08 TAI |
| | B JAN 18 SECRETAR TALLAHASS |
| 76) HALCYON CIRCLE Florida Street Address (P.O. Box NOT ACCEPTABLE) | |
| PENSACULA FL 32506 City/State/Zip | PH 2: 23 OF STATE EEFLORIDA |

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)

Letter Id: L1763512832



State of Alabama Department of Revenue **Certificate of Good Standing**

JAMES B STEWART LLC is in compliance with the requirements in Chapter 14, Title 4C, Code of Alabama 1975, prior to its repeal (relating to Franchise Tax) and Chapter 14A, Title 40, Code of Alabama 1975 relating to (Business Privilege and Corporate Shares Tax), as applicable through the tax year 2007.

> IN WITNESS WHEREOF, I hereunto set my hand this date of 18-Dec-2007

Phone: 334-353-7923

In a total