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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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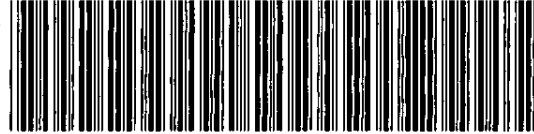
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 Thomas MAR 11 2008

LAW OFFICES

SCHNAPP, FALL, SILVEY & REID, L.L.C.

135 EAST MAIN STREET

P. O. BOX 151

FREDERICKTOWN, MISSOURI 63645-0151

TELEPHONE (573) 783-7212

FACSIMILE (573) 783-7812

DANIEL P. FALL

MICHAEL W. SILVEY*

R. SCOTT REID

NATHANIEL J. BOLLINGER

*MEMBER MISSOURI
AND ILLINOIS BAR

March 4, 2008

J.B. SCHNAPP (1920-1994)

JOHN W. REID, II (1940-1991)

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: INN SEACLUSION, LLC

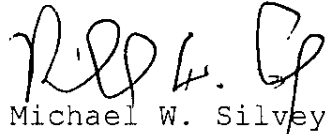
ATTENTION: Registration Section

Ladies/Gentlemen:

Enclosed please find "Application by Foreign Limited Liability
Company for Authorization to Transact Business in Florida"
Certificate of Existence and my firm's check in the amount of
\$160.00 as the required fee for filing, Certificate of Status and
certified copy.

If you need anything additional, please advise.

Very truly yours,


Michael W. Silvey

MWS:plw
Enclosures

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: INN SEACLUSION, LLC
(Name of Limited Liability Company)

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Michael W. Silvey
(Name of Person)

Schnapp, Fall, Silvey & Reid, LLC
(Firm/Company)

135 East Main Street; P.O. Box 151
(Address)

Fredericktown, Missouri 63645
(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Michael W. Silvey at (573) 783-7212
(Name of Person) (Area Code & Daytime Telephone Number)

MAILING ADDRESS:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☒ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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

FEB 14 2008

BROCKMILLER CONSTRUCTION, INC.
GENERAL CONTRACTORS

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. INN SEACLUSTON, 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 written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")

2. Missouri 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. February 1, 2008 5. Perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")

6. N/A
(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. 826 Cimarron Circle
Farmington, Missouri 63640
(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:

Marlene A. Brockmiller

826 Cimarron Circle

Farmington, MO 63640

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 or promoted in Florida: Residential and
vacation home real estate leasing.

Marlene Brockmiller
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
MARLENE A. BROCKMILLER

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TALLAHASSEE, FLORIDA

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FEB 14 2008

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

BRUCKMILLER CONSTRUCTION, INC.
GENERAL CONTRACTORS

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:

INN SEACLUSION, 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:

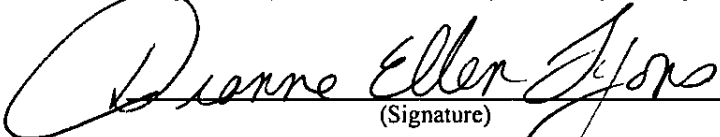
Dianne Ellen Lyons
(Name)

2934 Princeton Avenue
Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Jacksonville, FL 32210
City/State/Zip

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TALLAHASSEE, FLORIDA

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)