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COVER LETTER

10:	Division of Corporations
SUBJ	PALMAR CONSTRUCTION LLC
~~~	(Name of Limited Liability Company)
Florid	iclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in a," Certificate of Existence, and check are submitted to register the above referenced foreign limited by company to transact business in Florida
Please	return all correspondence concerning this matter to the following:
	ROBERT GRAHAM
	(Name of Person)
	PALMAR CONSTRUCTION
	(Firm/Company)
	1800 SHADOW OAKS RD
	(Address)
	<u>KISSIMMEE</u> , PL 34744
	(City/State and Zip Code)
For fu	rther information concerning this matter, please call:
	ROBGRT GRAHAM at (40) 846-3878  (Name of Person) (Area Code & Daytime Telephone Number)
	MAILING ADDRESS:  Division of Corporations  P.O. Box 6327  STREET ADDRESS:  Division of Corporations  Clifton Building
	Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301
Enclo	ed is a check for the following amount:  \$\Bigcup \frac{1}{2}\\$125.00 \text{ Filing Fee & Bigcup Status & Certificate}\$  Certificate of Status & Certified Copy of Status & Certified Copy  \$\Bigcup \frac{1}{2}\\$160.00 \text{ Filing Fee, Certified Copy}\$  \$\Bigcup \

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

	PLIANCE WITH SECTION 608.5 DIABILITY COMPANY TO TRANS			TITED TO REGISTER A FO	)REIGN
1	ALMAR CONSTRUCTUNION CONTROL C	y Company; must include	"Limited Liability Company,"	"L.L.C.," or "LLC.")	
			-		_
consent o	unavailable, enter alternate name of the managers or managing men y," "L.L.C.," "LLC.")				
	•	3	541736906		
(Jurisd	STATE OF VIRGINA liction under the law of which fo uny is organized)	reign limited liability	(FEI number, if	applicable)	•
4	U (17/04 (Date of Organization)	5.	GRIGIUAL (Duration: Year limited liabi		_
	(Date of Organization)		(Duration: Year limited liabi exist or "perpetual")	lity company will cease to	
6	PL. 1				_
	(Date first tra (See sections 6	nsacted business in Florid 08.501 & 608.502 F.S. to	la, if prior to registration.) determine penalty liability)	z., e.	
7		1800 SHADOU	u OAKS RD	A APA	
		Kissimuez	, PZ 34744	HAS HAS	· ·
		(Street Address of	Principal Office)	PERO P	
8. If lin	nited liability company is a	manager-managed co	ompany, check here	PH 1: 30	, C
9. The	name and usual business ac	dresses of the manag	ing members or managers	s are as follows.	<b>7</b>
	PAUL KELLER	769 GOKE ST, HE	RUDON, VA JOITO		
<u></u>	MARK MEDVENS	769 GAKE 9,	HERNOOD, VA 20120		
	ROBERT GRAHAM	1800 SITADOW OAKS	eo, Kissimueg, PL 31	1744	
the jurisdi translation	thed is an original certificate of existiction under the law of which it is on of the certificate under oath of the ture of business or purposes	nganized. (A photocopy is e translator must be submitt	not acceptable. If the certificate ed.)	is in a foreign language, a	
	A				•
	(In accordance v	rith section 608.408(3), F.S.,	orized representative of a the execution of this document of that the facts stated herein are tru	onstitutes	
		ROBERT S. GRA		···	

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:	
PALMAR CONSTRUCTION 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:	
ROBERT GRAHAM	NALLER TALLER
(Name)	一 超 1 厂
1800 SHADOW OAKS RD	SSEE SEE
Florida Street Address (P.O. Box NOT ACCEPTABLE)	FLO FILO
KISSIMMEE, FL 34744 City/State/Zip	ALIE -
Having been named as registered agent and to accept service of process for the above s liability company at the place designated in this certificate, I hereby accept the appoint agent and agree to act in this capacity. I further agree to comply with the provisions of relating to the proper and complete performance of my duties, and I am familiar with a obligations of my position as registered agent as provided for in Chapter 608, Florida S	ment as registered fall statutes nd accept the
(oignature)	

\$ 100.00 Filing Fee for Application

\$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)

\$ 25.00 Designation of Registered Agent

# Commontoealth of Hirginia



## State Corporation Commission

I Certify the Following from the Records of the Commission:

A certificate of organization was issued by the Commission to PalMar Construction, LLC, a limited liability company formed under the laws of VIRGINIA, effective as of November 17, 1994.

As of the date below, articles of cancellation have not been filed in this office by PalMar Construction, LLC, a Virginia limited liability company.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date: March 17, 2008

Joel H. Peck, Clerk of the Commission