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08/04/08--01025--017 \*\*87.50

M. THOMAS

AUG 2 0 2008

**EXAMINER** 

## COVER LETTER

TO: Registration Section Division of Corporations	, .	
SUBJECT: MOXIE INVESTMENT HOLD: (Name of Foreign		
Dear Sir or Madam:		
The enclosed Foreign Name Registration, certifica	ate and fee(s) are submitted for filing.	
Please return all correspondence concerning this n	natter to the following:	
JOHN WOO		
(Name of Person)	<del></del>	
_JSW & ASSOCIATES, LLC		
(Firm/Company)	· · · · · · · · · · · · · · · · · · ·	
3950 SHACKLEFORD ROAD, SUITE (Address)  DULUTH, GA 30096	G 19 PM HASSEE, FL	
(City/State and Zip Code)	) ORID	
For further information concerning this matter, ple	ease call:	
JOHN WOO	at ( <u>678</u> ) <u>468-7971</u>	
(Name of Person)	(Area Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount:		
\$87.50 Filing Fee	\$96.25 Filing Fee & Certified Copy	



August 5, 2008

JOHN WOO 3950 SHACKLEFORD ROAD, STE 425 DULUTH, GA 30096

SUBJECT: MOXIE INVESTMENT HOLDINGS, LLC

Ref. Number: W08000036944

We have received your document for MOXIE INVESTMENT HOLDINGS, LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

There is a balance due of \$72.50.

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

If you have any questions concerning the filing of your document, please (850) 245-6097.

Marsha Thomas Regulatory Specialist II

Letter Number: 508A00044667

## JSW & ASSOCIATES, LLC

### Attorneys at Law

Michael Chung

3950 Shackleford Road Suite 425 Duluth, GA 30096

John S. Woo (GA, CA & NC)

TELEPHONE (678) 638 - 0110

FACSIMILE (678) 638 - 0115

August 14, 2008

## VIA OVERNIGHT MAIL

Marsha Thomas
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: MOXIE INVESTMENT HOLDINGS, LLC
APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY
FOR AUTHORIZATION TO TRANSACT BUSINESS IN EMPTOR SECTION FLORIDA.

Dear Ms. Thomas:

Enclosed please find the followings:

- 1. A balance due check (#003775) in the amount \$72.50
- 2. Return Letter from you (Letter No.: 508A00044667)
- 3. Cover Letter
- 4. Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida.
- 5. Certificate of Designation of Registered Agent / Registered Office.
- 6. Certificate of Existence

Should you have any questions or concerns, please do not hesitate to contact me at our office.

Sincerely,

## 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: MOXIE INVESTMENT HOLDINGS, I.L.C.
(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.") GEORGIA (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) JULY 30, 2008 PERPETUAL (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 4247 SHACKLEFORD ROAD SUITE A-2 NORCROSS, GA 30093 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here X 9. The name and usual business addresses of the managing members or managers are as follows: STEVE HONG 1 4247 SHACKLEFORD RD STE A-2, NORCROSS, GA 30093 JINO WOO / 4247 SHACKLEFORD RD STE A-2, NORCROSS, GA 30093 JOHN WOO / 4247 SHACKLEFORD RD STE A-2, NORCROSS, GA 30093 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: **EXPORT OF METAL** COMMODITIES AND OPERATION OF RECYCLING YARD Signature of a member or an authorized representative of a member.

> JOHN WOO, Chief Operations Officer Typed or printed name of signee

(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.)

## . .

## 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:	
MOXIE INVESTMENT HOLDINGS, LLC	<del></del>
If name unavailable, the alternate name to be used in the state of Florida is:	08 AUG 19 SECREINF TALLAHASS
2. The name and the Florida street address of the registered agent and office are:	4 OF 13 OF 1
Agents and Corporations, Inc.	STATE STATE
(Name)	
300 Fifth Avenue South, Suite 101-330 Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Naples FL 34102	
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.

(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Control No. 08059734

## STATE OF GEORGIA

## Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

# CERTIFICATE OF EXISTENCE

I, Karen C Handel, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

## MOXIE INVESTMENT HOLDINGS, LLC

## **Domestic Limited Liability Company**

was formed or was authorized to transact business on 07/30/2008 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 1st day of August, 2008

> Karen C Handel Secretary of State

Haren C. Handel

Certification Number: 3062312-1 Reference: Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp