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SECRETARY OF STATE

T. CLINE

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EXAMINER

COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT:	TWD INVESTME	NTS, LLC		
SUBJECT:	(Name of Lir	nited Liability Company)	- -	
Florida," Cer	• • • • • •	iability Company for Authorization to T submitted to register the above reference		ı
Please return	all correspondence concerning this	matter to the following:		
	Lesia Carroll			
	(N	lame of Person)		
	TWD INVESTMENTS, LLC		2008 AUG 2 SECRETAL	**************************************
		irm/Company)	5 .	MANUT.
	(I	min/Company)	22	François
	3589 Carter Road Suite 101			
		(Address)	AM 10: 06	
	Buford, GA 30518			
	(City/S	State and Zip Code)		
For further in	nformation concerning this matter, p	lease call:		
Lesi	a Carroll	at (678) 318-1055		
	(Name of Person)	(Area Code & Daytime Telephon	ne Number)	
Divis P.O. l	LING ADDRESS: tion of Corporations Box 6327 hassee, FL 32314	STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		
	a check for the following amount: 25.00 Filing Fee \$\square\$\$\$\square\$\$\$\$Certificate \$\alpha\$\$\$\$\$\$\$\$\$		ling Fee, Certificate f Status & Certified Cop	ру

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:

ι.	TWD INVESTMENTS, LLC	_
	(Name of Foreign Limited Liability Company)	
2	GEORGIA (Jurisdiction under the law of which foreign limited liability) 3. 58-1308133 (FEI number, if applicable)	
	company is organized)	
4.	10/03/1995 _{5.} PERPETUAL	
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	-
6.		
٠.	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	_
7	3589 CARTER ROAD SUITE 101 BUFORD, GA 30518	
′.		_
	(Street Address of Principal Office)	-
8.	If limited liability company is a manager-managed company, check here	energe grants fi
9.	The name and usual business addresses of the managing members or managers are as follows:	† ************************************
	TERRY W. DOOLEY - 3589 CARTER ROAD STE 101 BUFORD, GA 30518	
	ATE CO	-
		_
		-
the	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of regurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a instation of the certificate under oath of the translator must be submitted.)	cords
11	. Nature of business or purposes to be conducted or promoted in Florida:	_
	PROPERTY MANAGEMENT	
	M-O	
	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.)	
	TERRY W. DOOLEY	

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 Con	npany is:	
2. The name an	nd the Florida street addres	s of the registered agent and office are:	
	CT CORPORATION SYSTEM		
		(Name)	To E
	1200 SOUTH PINE ISL	AND ROAD	
	Florida Street Address (P.O. Box NOT ACCEPTABLE)		ARY SSET
	PLANTATION	FL 33324 City/State/Zip	AH 10: 0 EFFLORE
		Chyrolate/21p	लुल क

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.

Morie Edward (Signature)

Marie Edwards Asst. Secretary

\$ 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. K529842

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

TWD INVESTMENTS, LLC

Domestic Limited Liability Company

was formed or was authorized to transact business on 10/03/1995 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 6th day of August, 2008

Karen C Handel Secretary of State

Haull Handel

Certification Number: 3069492-1 Reference:

Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp