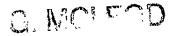
(Red	questor's Name)	
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Special Instructions to F	Filing Officer:	
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EXAMINER



800135398488

09/08/08--01034--009 **125.00

Gulf Coast Wetlands Mitigation Answers, L.L.C. P.O. Box 550 Picayune, Ms. 39466 (601) 799-1191

September 3, 2008

Office of the Secretary of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

To Whom It May Concern:

Please find enclosed

- (1) an original executed Application for Authority to Transact Business in Florida; and
- (2) a check in the amount of \$125.00 which represents the filing fee for above mention application.

Thank you for your assistance with this matter.

Sincerely,

E. C. Stuart, Jr.

E.C. Stuart,

Member

ECSjr/kls Enclosure.

COVER LETTER

TO:

Registration Section

Divisio	on of Corporations	
. SUBJECT: _		itigation Answers, L.L.C.
	(Name o	f Limited Liability Company)
Florida," Certi		ed Liability Company for Authorization to Transact Business in are submitted to register the above referenced foreign limited ida
Please return a	Il correspondence concerning	this matter to the following:
	Dan R. O'Neal	
- -		(Name of Person)
_	Gulf Coast Wetlands	Mitigation Answers, L.L.C.
		(Firm/Company)
	P.O. Box 550	
•		(Address)
	Picayune, MS 39466	
-	(Ci	ity/State and Zip Code)
For further info	ormation concerning this matte	er, please call:
Dan R	. O'Neal	at (601) 528-9627
	(Name of Person)	(Area Code & Daytime Telephone Number)
MAILI	ING ADDRESS:	STREET ADDRESS:
Division of Corporations Division		Division of Corporations
P.O. Bo	ox 6327	Clifton Building
Tallaha	ssee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301
	heck for the following amount 00 Filing Fee \$130.00 Filing F Certific	

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:

(If na	ame unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a cop	y of th	 ne writte
	ent of the managers or managing members adopting the alternate name. The alternate name must include "Limitopany," "L.L.C.," "LLC.")	d Lia	bility
	Mississippi applied for urisdiction under the law of which foreign limited liability ompany is organized) applied for (FEI number, if applicable)	<u> </u>	
4	(Date of Organization) 5. perpetual. (Duration: Year limited liability company will cexist or "perpetual")	ease to)
6		-0-	P.,
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	3S 8	SECR ISIO
7	115 Williams Avenue, Suite B	P +8	- <u>-</u>
_	Picayune, MS 39466 (Street Address of Principal Office)	70	
8. I	f limited liability company is a manager-managed company, check here	ੀ 3: L8	STATE
9. T	The name and usual business addresses of the managing members or managers are as follows:		**
	Dan R. O'Neal - P.O. Box 217, McHenry, MS 39561		_
_	Martin L. O'Neal - P.O. Box 217, McHenry, MS 39561		
-	E. C. Stuart, Jr P.O. Box 550, Picayune, MS 39466		
the ju	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custourisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign langulation of the certificate under eath of the translator must be submitted.)	•	
11.	Nature of business or purposes to be conducted or promoted in Florida: <u>wetlands mitiga</u>	tion	<u>ı</u>
	Dank. O'real		 •
	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.)		
	Dan R. O'Neal		

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:
Gulf Coast Wetlands Mitigation Answers, L.L.C.
f 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:
Dennis L. Blackburn, Attorney (Name)
5150 Belfort Road South, Building 500
Florida Street Address (P.O. Box NOT ACCEPTABLE)
Jacksonville FL 32256
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)

State of Mississippi

Office of the Secretary of State C. Delbert Hosemann, Jr., Secretary of State Jackson, Mississippi

CERTIFICATE

I, C. DELBERT HOSEMANN, JR., Secretary of State of the State of Mississippi, and as such the legal custodian of the records as required by The Mississippi Limited Liability Company Act to be filed in my office do hereby certify that:

GULF COAST WETLANDS MITIGATION ANSWERS LLC

Formed August 18, 2008

A Mississippi Limited Liability Company has filed the necessary documents in this office and has obtained a certificate of formation under the provisions of The Mississippi Limited Liability Company Act as shown by the records in this office.

That the registered office of said Limited Liability Company is located at:

115 WILLIAMS AVENUE SUITE B PO BOX 550 PICAYUNE MS 39466

and that the registered agent at that address is:

HAWKINS, RUSSELL

I further certify that said Limited Liability Company has paid the fees for filing the above papers required by law as shown by the records of this office and that said Limited Liability Company is in good standing to do business in Mississippi at this time.

SS A STATE OF MISSISSIAN

Given under my hand and seal of office August 19, 2008

C. Delbert Hosemann, Jr. Secretary of State

Dellet Hosemann, dr.

Certification Number: 10363710-4 Page 1 of 1 Reference: E.C. Stuart, Jr.-YH Verify this certificate online at https://secure.sos.state.ms.us/busserv/corp/soskb/verify.asp