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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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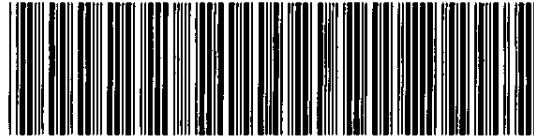
(Business Entity Name)

(Document Number)

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J. BRYAN

NOV - 7 2008

EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Edge Commercial, 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:

**BUSINESS SUPPORT, INC.**  
**417 STOWE AVE, SUITE A**  
**ORANGE PARK, FL 32073**

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For further information concerning this matter, please call:

**Michelle Sweat or Deanna Brown**

(Name of Person)

**@ (904) 264-1289**

(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

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. Edge Commercial, LLC  
(Name of Foreign Limited Liability Company)

2. Iowa 3. 26-2626165  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 5/16/08 5. Perpetual  
(Date of Organization)

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. 2910 Westown Parkway  
West Des Moines, Iowa 50266  
(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:

Ward Phifer 2910 Westown Parkway West Des Moines, Iowa 50266  
Dean Ammantrout "  
Jason Ceretti "

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: **Any and all lawful business**

General Contractor

Ward Phifer  
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.)

Ward Phifer  
Typed or printed name of signer

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**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:

Edge Commercial, LLC

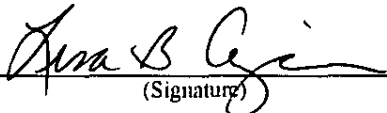
2. The name and the Florida street address of the registered agent and office are:

Business Support, Inc. - Lisa Cogan  
(Name)

417 Stowe Ave., Ste. A  
Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Orange Park FL 32073  
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)

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**IOWA SECRETARY OF STATE  
MICHAEL A. MAURO**



Date: 10/29/2008

**CERTIFICATE OF EXISTENCE**

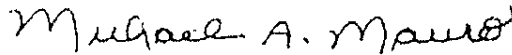
Name: EDGE COMMERCIAL, LLC (490DLC - 363551)  
Date of Organization: 5/16/2008  
Duration: PERPETUAL

I, MICHAEL A. MAURO, Secretary of State of the State of Iowa, custodian of the records of limited liability companies, certify that the limited liability company named on this certificate was duly organized under the laws of Iowa on the date printed above, that all fees required by the Iowa Limited Liability Company Act have been paid, and that articles of dissolution have not been filed.

Certificate ID: CS24472

To validate this certificate please visit  
the following web site and enter the certificate ID.

[www.sos.state.ia.us/ValidateCertificate](http://www.sos.state.ia.us/ValidateCertificate)

  
MICHAEL A. MAURO SECRETARY OF STATE

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STATE OF IOWA  
DIVISION OF CORPORATIONS  
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**IOWA SECRETARY OF STATE  
MICHAEL A. MAURO**



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DIVISION OF CORPORATIONS  
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**Certificate Validation**

The following certificate was issued by the Iowa Secretary of State.

Certificate ID: CS24472

Validation Date: 10/29/2008

Date: 10/29/2008

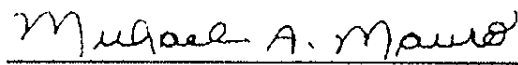
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MICHAEL A. MAURO      SECRETARY OF STATE