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M. THOMAS

APR 1 4 2009

EXAMIN

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Jamian McElroy LLC (Name	e of Limited Liability Company)
· · · · · · · · · · · · · · · · · · ·	nited Liability Company for Authorization to Transact Business in ck are submitted to register the above referenced foreign limited lorida
Please return all correspondence concernir	ng this matter to the following:
Joseph A. Yolofsky	
	(Name of Person)
Joseph A. Yolofsky,	P.A.
	(Firm/Company)
1430 Brickell Bay Dr	(Firm/Company) ive #107 (Address) (City/State and Zip Code)
	(Address) ジョン
Miami, FL 33131	
	(City/State and Zip Code)
For further information concerning this ma	
William C. Hamlin	at (305) 377-8778
(Name of Person)	(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 amou \$\sum \\$125.00 \text{Filing Fee} \$	

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:

_L Jamian McElroy LLC	
(Name of Foreign Limited Liability Company; must	include "Limited Liability Company," "L.L.C.," or "LLC.")
	ourpose of transacting business in Florida and attach a copy of the writte e alternate name. The alternate name must include "Limited Liability
_{2.} Michigan	_{3.} 35-2303784
(Jurisdiction under the law of which foreign limited liabi company is organized)	lity (FEI number, if applicable)
4. August 27, 2007	5. Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6. April 8, 2009	(Duration: Year limited liability company will cease to exist or "perpetual")
(Date first transacted business	
7 1221 Brickell Avenue, Suite 900	2 F.S. to determine penalty liability)
Miami, FL 33131	52
	dress of Principal Öffice)
8. If limited liability company is a manager-mana	aged company, check here 🗹
9. The name and usual business addresses of the	managing members or managers are as follows:
John Jamian	
47689 E. Anchor Court	
Plymouth, MI 48170	
the jurisdiction under the law of which it is organized. (A phototranslation of the certificate under oath of the translator must be	,
11. Nature of business or purposes to be conducted	ed or promoted in Florida: Any lawful business
purpose authorized under the Act.	
A UM	
(In accordance with section 608.408)	n authorized representative of a member. (3), F.S., the execution of this document constitutes f perjury that the facts stated herein are true.) , Esq.

Typed or printed name of signee

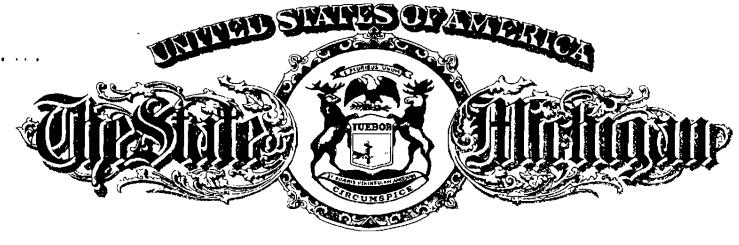
CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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 Limit	led Liability Company is:	
Jamian McElroy, L	LC	
If name unavailable, the	alternate name to be used in the state of Florida is:	
2. The name and the Flo	rida street address of the registered agent and office are:	
Josep	h A. Yolofsky, P.A.	
	(Name)	
1430	(Name) Brickell Bay Drive #107 Florida Street Address (P.O. Box NOT ACCEPTABLE)	77
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	,
Miami	FL 33131	
	City/State/Zip	
Having been named as re	gistered agent and to accept service of process for the above stated limited	

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.

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)



Department of Energy, Labor & Economic Growth

Lausing, Michigan

This is to Certify That

JAMIAN MC ELROY LLC

was validly organized on August 27, 2007 as a Limited Liability Company. Said Limited Liability Company is validly in existence under the laws of this state and has satisfied its annual filing obligations.

This certificate is issued pursuant to the provisions of 1993 PA 23, as amended, to attest to the fact that the company is in good standing in Michigan as of this date.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 17th day of March, 2009

Bureau of Commercial Services

,Director