

Division of Corporations Public Access System

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To:

Division of Corporations

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From:

Account Name

: TRIAD PROFESSIONAL SERVICES, LLC

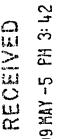
Account Number : 120020000094

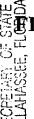
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LORIDA/FOREIGN LIMITED LIABILITY CO.

Vlass Temple Terrace, LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

S. HAWKES

MAY 0 6 2009

EXAMINER

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Corporate Filing Menu

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COVER LETTER

TO:	Registration Section Division of Corporations
SUBJE	CT: VLASS TEMPLE TERRACE, LLC Name of Limited Liability Company
Existen	closed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of the ce, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.
1 (6030)	eturn all correspondence concerning this matter to the following:
	Sharon K, Gray
	Name of Person
	Triad Professional Services, LLC
	Firm/Company
	2050 Marconi Drive, Sulte 150
	Address
	Alpharetta, GA 30005
	City/State and Zip Code
	abuckley@hssw.com
	E-mail address: (to be used for future annual report notification)
For furth	er information concerning this matter, please call:
	Sharon K. Gray at (770) 777-2091
	Name of Person Area Code & Daytime Telephone Number
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclose	sid is a check for the following amount: \$125.00 Filing Fee \$\sum \text{\$130.00 Filing Fee & }\sum \$
	Continue of Distance Copy

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 FOR LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: VLASS TEMPLE TERRACE, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," (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) 03/19/2009 Perpetual (Duration: Year limited liability company will cease to (Date of Organization) exist or "perpetual") Upon qualification (Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability) 7. 3334 Peachtree Road, Suite 1703 Atlanta, GA 30326 (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: Michael B. Vlass - 3334 Peachtree Road, Suite 1703, Atlanta, GA 30326 Michael J. Lant - 3334 Peachtree Road, Suite 1703, Atlanta, GA 30326 Mark T. Sneed - 3334 Peachtree Road, Suite 1703, Atlanta, GA 30326 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: Real estate development Signature of a member or an arthorized 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.)

Amanda J. Buckley

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:	
VLASS TEMPLE TERRACE, LLC	
If unavailable, the alternate to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office are:	
NRA! Services, Inc.	
(Name)	
2731 Executive Park Drive, Suite 4	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Weston, FLF 33331	
Cîty/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. 09020139

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

VLASS TEMPLE TERRACE LLC

Domestic Limited Liability Company

was formed or was authorized to transact business on 03/19/2009 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 5th day of May, 2009

Karen C Handel Secretary of State

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Certification Number: 4261516-1 Reference: Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/venfy.asp