Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H090001260143)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : JOHNSON, POPE, BOKOR, RUPPEL & BURNS, LLP.

Account Number : 076666002140

Phone : (727) 461-1818

Fax Number

: (727)441-8617

FLORIDA/FOREIGN LIMITED LIABILITY CO.

NATIONAL RECOVERY FUND I, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

Electronic Filing Menu

Corporate Filing Menu

Help

50776.47798

(((H090001260143)))

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 BLISIN			
1. National Recovery Fund I,	LLC	e "Limited Liability Company," "L.L.C.," or "LLC.")	 -
(Name of Foreign Limited Liability Company	/; must include	e "Limited Liabitity Company," "L.L.C.," or "LLC.")	
(If name unavailable, onter alternate name adopted for consent of the managers or managing members adopted formpany," "L.L.C.," "LLC.")	or the purpose ting the altern	of transacting business in Florida and attach a copy of ate name. The alternate name must include "Limited	of the written Liability
₂ Delaware	3.		
2 Delaware (Jurisdiction under the law of which foreign limite company is organized)	ed liability	(FEI number, if applicable)	
4. May 8 , 2009 (Date of Organization)	5.	Perpetual (Duration: Year limited liability company will glass	 0
(Date of Organization)		(Duration: Year limited liability company will dease exist or "perpetual")	O9 HAY
6. (Date first transported by	sinace in Flor	ula If pring to registration \	<u> </u>
(See sections 608.50) & C	508.502 F.S. 6	ida, if prior to registration.) o determine penalty liability)	
7. 2905 Rigsby Lane, Suite	200		
Safety Harbor, FL 34695		0	% %
(Str	eet Address of	Principal Office)	<u>'</u> m' •
8. If limited liability company is a manager	-managed c	ompany, check here	
9. The name and usual business addresses of	of the manag	ging members or managers are as follows:	
National Real Estate Ventur	es, LLC	, a Nevada limited liability com	pany
2905 Rigsby Lane, Suite	200		
Safety Harbor, FL 34695			-
	(A photocopy i	ys old, duly authenticated by the official having custody is not acceptable. If the certificate is in a foreign languag ted.)	
11. Nature of business or purposes to be con	nducted or p	promoted in Florida: Real estate invest	ments
- Reth	<u>~</u> .		 '
Signature of a membe	r or an auth	orized representative of a member,	
	- 100,400(3), 1 10,	s the sale Consenses of him demonstrate visions and the	

an affirmation under the penaltics of perjury that the facts stated herein are true.)

Peter H. Monroe, Chairman

Typed or printed name of signee

(((H090001260143)))

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.

	_
	-
	S TI
RY OF SSEE	20 A
	œ <u> </u>
	TARY OF ASSEE F

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)

T-725 P.04/04 F-379

(((H090001260143)))

Delaware

PAGE

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NATIONAL RECOVERY FUND I, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTIETH DAY OF MAY, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NATIONAL RECOVERY FUND I, LLC" WAS FORMED ON THE EIGHTH DAY OF MAY, A.D. 2009.

4685262 8300

090500545

You may varify this comtificate online

AUTHENTY CATION: 7313178

DATE: 05-20-09

(((H090001260143)))