# HOGOODOA

(Requestor's Na	ame)
(Address)	
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(City/State/Zip/F	<u>~</u>
PICK-UP WAI	A MAIL
(Business Entity	Name)
(Document Nun	iber)
Certified Copies Certifi	cates of Status
Special Instructions to Filing Office	
L. SELLE	RS
JUN: <b>- 2</b> 200	
EXAMIN	ER
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SECRETARY OF STATE

FILED

#### **COVER LETTER**

	ation Section n of Corporations
SUBJECT:	OccaNside COO, LLC
	Name of Limited Liability Company
	pplication by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of neck 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:
	Steven A. Barton - Manager
	Name of Person
	Ocianside 680, LLC
	Firm/Company
	5960 PENINSULA AVE# 108
	Address
	Kug West, Fla 33040 City/State and Zip Code
_	Stevieray barton & all, com
	E-mail address: (to be used for future annual report notification)
For further inform	nation concerning this matter, please call:
Ste	Name of Person Area Code & Daytime Telephone Number
	Name of Person Area Code & Daytime Telephone Number
	NG ADDRESS: STREET ADDRESS: Of Corporations Division of Corporations
Registra	tion Section Registration Section
P.O. Bos Tallahas	x 6327 Clifton Building see, FL 32314 2661 Executive Center Circle
,	Tallahassee, FL 32301
Enclosed is a	check for the following amount:
\$125.	00 Filing Fee \$\int \\$130.00 Filing Fee & Certificate of Status \$\int \text{Certified Copy}\$\$ \$155.00 Filing Fee & \int \\$160.00 Filing Fee, Certificate of Status & Certified Copy

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	OMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN FED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
	Dolan Side 680, LLC
l	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
onser	me unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written int of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability any," "L.L.C," "LLC.")
Z. (Jur	Defended 3. IRS 20-2493538  risdiction under the law of which foreign limited liability (FEI number, if applicable)  repany is organized)
ł	(Date of Organization)  5. Device the Company will cease to exist or "perpetual"
<b>5</b> .	NA
· —	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
<i>'</i> .	
	3000 TechNoTogy Drive Angleton, Tex 77515 (Street Address of Principal Office)
	(Street Address of Principal Office)
. If	limited liability company is a manager-managed company, check here
. Th	ne name and usual business addresses of the managing members or managers are as follows:
	Steven A. Barton-Manager 5960 Peninsula Ave #108 Ky West, Fla 33040
	Ky West, Fla 33040
ne juri anslat	tached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in isdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a tion of the certificate under oath of the translator must be submitted.)
. I. I	Property rentals, gentleral corporal Stumen A. Burton Sus, NE
	Stuck A. Barton
	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.)  Typed or printed name of signee
	E S S S S S S S S S S S S S S S S S S S

### 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:
OCEANSIDE 680, 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:
CYNTHIA J. PFEIFFER, ATTORNEY
(Name)
1485 S. PRESCOTT AVE.
Florida Street Address (P.O. Box NOT ACCEPTABLE)
CLEARWATER: JFL 33756
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.

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

SECRETARY OF STATE

# Delaware

PAGE 1

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "OCEANSIDE 680, 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 ELEVENTH DAY OF MAY, A.D. 2009.

3918999 8300

090452717

AUTHENTICATION: 7294865

DATE: 05-11-09

You may verify this certificate online at corp.delaware.gov/authver.shtml