

M09000003456

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(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS
Sept. 2, 2009
EXAMINER

BYRD & WISER

ATTORNEYS AT LAW

145 MAIN STREET

P.O. BOX 1939

BILOXI, MISSISSIPPI 39533

TELEPHONE (228) 432-8123

FAX (228) 432-7029

email nwiser@byrdwiser.com

ROBERT ALAN BYRD*
NICHOLAS VAN WISER

JAMES R. LOCKARD

*ALSO ADMITTED IN MICHIGAN

Our file numbers: 1421.00000

August 24, 2009

VIA FEDERAL EXPRESS

Office of the Florida Department of State
Attention: Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301
Tel: (850) 245-6052

Re: Palisades Pointe, LLC, a Mississippi limited liability company

Dear Sir or Madam:

Enclosed please find the application for qualification of the referenced limited liability company to do business in the State of Florida, along with our firm check in the amount of \$160.00 representing payment of the filing fee for the application, designation of registered agent, certified copy and a certificate of status. I have also included a pre-addressed, postage pre-paid envelope for your convenience in returning same to me.

Should you have any questions, please do not hesitate to contact me.

Thanking you for your usual courtesies in this matter, I remain,

Yours truly,

Byrd & Wiser



Nicholas Van Wiser

NVW:krq
Enclosures



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 28, 2009

IKE THRASH / PALISADES POINTE, LLC
59 AT 98 PLACE
HATTIESBURG, MS 39402

SUBJECT: PALISADES POINTE, LLC
Ref. Number: W09000038937

We have received your document for PALISADES POINTE, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6047.

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 209A00029007

BYRD & WISER

ATTORNEYS AT LAW

145 MAIN STREET

P.O. BOX 1939

BILOXI, MISSISSIPPI 39533

TELEPHONE (228) 432-8123

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Thanking you for your usual courtesies in this matter, I remain,

Yours truly,

Byrd & Wiser



Nicholas Van Wiser

NVW:krg
Enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PALISADES POINTE 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:

Ike Thrash

Name of Person

Palisades Pointe, LLC

Firm/Company

59 at 98 Place

Address

Hattiesburg, MS 39402

City/State and Zip Code

ithrashdpi@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nicholas Van Wiser

Name of Person

at (228)

432-8123

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

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
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:

1. Palisades Pointe LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

Palisades Pointe Jacksonville, LLC
(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.")

2. Mississippi 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 07/27/2009 5. perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")

6. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. _____
5800 University Blvd. West, Jacksonville, Florida 32216
(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:

Ike Thrash, 59 at 98 Place Blvd., Hattiesburg, MS 39402

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 management

Nicholas Van Wiser, Attorney
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.)

Nicholas Van Wiser

Typed or printed name of signee

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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:

Palisades Pointe, LLC

If unavailable, the alternate to be used in the state of Florida is:

Palisades Pointe Jacksonville LLC

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

Business Filings Incorporated.
(Name)

1203 Governor's Square Boulevard, Ste 101
Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Tallahassee, FL 32301
City/State/Zip

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2009 SEP -1 PM 2:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

MARIA MASE - Asst. Sec. of Business Filings Incorporated
(Signature)

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

State of Mississippi
Office of the Secretary of State
C. Delbert Hosemann, Jr., Secretary of State
Jackson, Mississippi

CERTIFICATE

I, C. DELBERT HOSEMAN, JR., Secretary of State of the State of Mississippi, and as such the legal custodian of the records as required by The Mississippi Limited Liability Company Act to be filed in my office do hereby certify that:

PALISADES POINTE LLC

Formed July 27, 2009

A Mississippi Limited Liability Company has filed the necessary documents in this office and has obtained a certificate of formation under the provisions of The Mississippi Limited Liability Company Act as shown by the records in this office.

That the registered office of said Limited Liability Company is located at:

PO BOX 1939
BILOXI MS 39533-1939

and that the registered agent at that address is:

WISER, NICHOLAS VAN

I further certify that said Limited Liability Company has paid the fees for filing the above papers required by law as shown by the records of this office and that said Limited Liability Company is in good standing to do business in Mississippi at this time.



Given under my hand
and seal of office
August 20, 2009

C. Delbert Hosemann, Jr.

C. Delbert Hosemann, Jr.
Secretary of State