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C. LEWIS

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EXAMINER

#### **COVER LETTER**

TO:	Registration Se Division of Con		,		
SUBJE	ЕСТ:	Utility Man	agement Association LLC	<u> </u>	
		Na	ame of Limited Liability Company		
				Transact Business in Florida," Certificate of lity company to transact business in Florida	
Please	return all corresp	ondence concerning this m	natter to the following:		
			Gary A. Light		
			Name of Person		
	Utility Management Association LLC				
			Firm/Company		
3289 McCullough Blvd.					
			Address		
			Belden, MS 38826		
			City/State and Zip Code		
			suzanne@umaonline.biz (to be used for future annual report no	tification)	
For fun	ther information of	concerning this matter, ple	•	anoundin)	
		Gary A.Light	at (662)	844-5532	
		Name of Person	Area Code & Daytime Telephor	ne Number	
	MAILING AD Division of Cor Registration See P.O. Box 6327 Tallahassee, FL	porations ction	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		
Enclos	sed is a check i	for the following among Fee \$130.00 Filin Certificate	ng Fee & \$155.00 Filing Fee &	\$160.00 Filing Fee, Certificate of Status & Certified Copy	



September 29, 2009

GARY A. LIGHT / UTILITY MANAGEMENT ASSOCIATION LLC 3289 MCCULLOUGH BLVD. BELDEN, MS 38826

SUBJECT: UTILITY MANAGEMENT ASSOCIATION LLC

Ref. Number: W09000043435

We have received your document for UTILITY MANAGEMENT ASSOCIATION LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the name, title, and business address of each managing member or manager who will manage the foreign limited liability company in the state of Florida. Please insert "MGRM" in the title portion for each managing member and "MGR" in the title portion for each manager.

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.

Letter Number: 109A00031609

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

### \*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.	. Utility Management Association LLC  (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	-				
	Utility Management Association of Mississippi					
co	f name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the purpose of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liabil ompany," "L.L.C," "LLC.")					
2.	Mississippi 3 03-0502117					
	Mississippi (Jurisdiction under the law of which foreign limited liability company is organized)  3. 03-0502117 (FEI number, if applicable)	•				
4.	01/2003 5. Perpetual (Date of Organization) (Duration: Year limited liability company will cease to					
	(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.	3289 McCullough Blvd.					
	Belden, MS 38826					
	(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:					
	Gary A. Light					
\$3289 NcCollough Blud.						
	- Raidon, NS 38826					
the tran	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of receptable is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of receptable. If the certificate is in a foreign language, a instation of the certificate under oath of the translator must be submitted.)  Nature of business or purposes to be conducted or promoted in Florida:	ords in				
	Sell energy efficient products to residential home owners					
	- Fay Tyt					
	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 penaltics of perjury that the facts stated herein are true.)	#=				
	Gary A. Light	m				
	Typed or printed name of signee	ILED				
	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:	
Utility Management Association LLC	
If unavailable, the alternate to be used in the state of Florida is:	
Utility Management Association of Mississippi	
2. The name and the Florida street address of the registered agent and office are:  Cov p Divoca Agants Inc  (Name)  515 East Park Are.  Florida Street Address (P.O. Box NOT ACCEPTABLE)	TALLAHASSEE, FLORIE
Tailavassee FL 32301 City/State/Zip	P

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.

lettalden Hist. Sct.

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\$ 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 HOSEMANN, 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:

UTILITY MANAGEMENT ASSOCIATION, LLC

Formed January 15, 2003

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:

1898 NELLE STREET TUPELO MS 38801

and that the registered agent at that address is:

**GARY LIGHT** 

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.

STATE OF THE STATE

Given under my hand and seal of office July 9, 2009

C. Delbert Hosemann, Jr. Secretary of State

Certification Number: 11275165-1 Page 1 of 1 Reference: Verify this certificate online at https://business.sos.state.ms.us/corp/soskb/verify.asp