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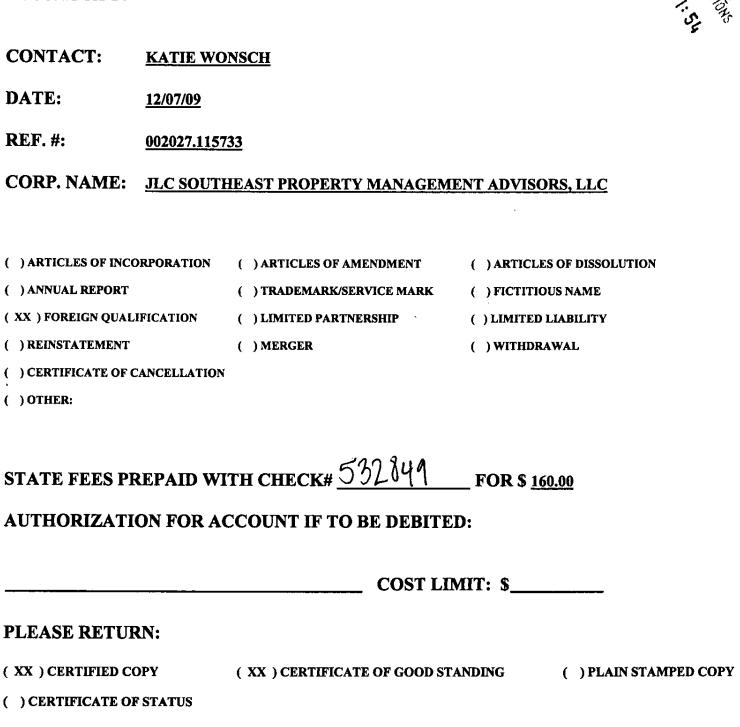
DEC - 7 2009

EXAMINER

CORPDIRECT AGENTS, INC. (formerly CCRS) 515 EAST PARK AVENUE TALLAHASSEE, FL 32301 222-1173

FILING COVER SHEET ACCT. #FCA-14

Examiner's Initials



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	1 JLC Southeast Property Management Advisors, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "L	(C:")
co	(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a consent of the managers or managing members adopting the alternate name. The alternate name must include "Lin Company," "L.L.C.")	opy of the writte
2.	2. Georgia 3. (Iurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	
4.	00/00/00	cease to
6. 7	(Date first transacted business in Florida, if prior to registration.) (See sections 608 501 & 608 502 F.S to determine penalty liability)	DO OT
,	Atlanta, GA 30318 (Street Address of Principal Office)	09 DEC -7 PH 1:54
	If limited liability company is a manager-managed company, check here The name and usual business addresses of the managing members or managers are as follows JLC Southeast, LLC 1575 Northside Drive, Bldg 100, Suite 200	:
	Atlanta, GA 30318	
he.	O. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having cus re jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign lan anslation of the certificate under oath of the translator must be submitted.)	tody of records in guage, a
l 1 .	1. Nature of business or purposes to be conducted or promoted in Florida:	
	Real estate property management	
	mm	
	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)	
	William S. Rogers, Jr., Authorized Rep.	
	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:	
JLC Southeast Property Management Advisors, 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:	
William S. Rogers, Jr. (Name)	
1538 The Greens Way, Ste 105 Florida Street Address (P.O. Box. NOT ACCEPTABLE)	
Jacksonville Beach FL 32250 City/State/Zip	
Having been named as registered agent and to accept service of process for the above stated liability company at the place designated in this certificate, I hereby accept the appointment agent and agree to act in this capacity. I further agree to comply with the provisions of all stretating to the proper and complete performance of my duties, and I am familiar with and accepting to the proper and complete performance of my duties, and I am familiar with and accepting to the proper and complete performance of my duties, and I am familiar with and accepting to the proper and complete performance of my duties, and I am familiar with and accepting to the proper and complete performance of my duties, and I am familiar with and accepting to the proper and complete performance of my duties, and I am familiar with and accepting to the proper and complete performance of my duties, and I am familiar with and accepting to the proper and complete performance of my duties, and I am familiar with and accepting to the proper and complete performance of my duties, and I am familiar with and accepting to the proper and complete performance of my duties, and I am familiar with an accepting to the proper and complete performance of my duties, and I am familiar with an acceptance of my duties, and I am familiar with an acceptance of my duties, and I am familiar with an acceptance of my duties, and I am familiar with an acceptance of my duties, and I am familiar with an acceptance of my duties, and I am familiar with an acceptance of my duties, and I am familiar with a complete performance of my duties, and I am familiar with a complete performance of my duties, and I am familiar with a complete performance of my duties, and I am familiar with a complete performance of my duties, and I am familiar with a complete performance of my duties, and I am familiar with a complete performance of my duties, and I am familiar with a complete performance of my duties, and I am fam familiar with a complete performance of my duties, and I am fam	t as registered statutes ccept the

\$ 100.00 Filing Fee for Application

\$ 25.00

\$ 30.00 \$ 5.00

Designation of Registered Agent

Certificate of Status (optional)

Certified Copy (optional)

Control No. 09020259

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

JLC SOUTHEAST PROPERTY MANAGEMENT ADVISORS, LLC

Domestic Limited Liability Company

was formed or was authorized to transact business on 03/20/2009 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 4th day of December, 2009

Karen C Handel Secretary of State

faun C. Handel

Certification Number: 4718926-1 Reference:

Verify this certificate online at http://corp sos state ga us/corp/soskb/verify asp