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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

T. HAMPTON

DEC 22 2009

EXAMINER

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SEMINOLE OAKS, 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:

Thomas S. Gibson
Name of Person

Rish, Gibson & Scholz, P.A.
Firm/Company

P. O. Box 39
Address

Port St. Joe, FL 32457
City/State and Zip Code

tgibson@psjlaw.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Thomas S. Gibson at (850) 229-8211
Name of Person 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

RISH, GIBSON & SCHOLZ, P.A.

ATTORNEYS AT LAW

WILLIAM J. RISH (1932-2008)
THOMAS S. GIBSON
S. RUSSELL SCHOLZ

THOMAS S. GIBSON

TELEPHONE • (850) 229-8211

FACSIMILE • (850) 227-1619

E-MAIL • tgibson@psjlaw.com

116 SAILOR'S COVE DRIVE
PORT ST. JOE, FLORIDA 32456

MAIL TO:
POST OFFICE BOX 39
PORT ST. JOE, FLORIDA 32457

November 3, 2009

Florida Department of State
Division of Corporations
Registration Section
P. O. Box 6327
Tallahassee, FL 32314

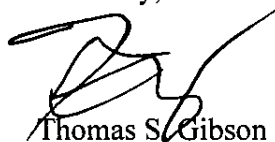
Re: Seminole Oaks, LLC; RGS FN 09-0467

Dear Sir or Madam:

I have enclosed forms necessary to register Seminole Oaks, LLC in Florida, together with our check in the amount of \$160 to cover the filing fee, designation of registered agent, certified copy, and certificate of status. Also enclosed is a Certificate of Existence from Georgia. Please return the certified copy and certificate of status to our office.

If you have any questions, please give me a call.

Sincerely,



Thomas S. Gibson

TSG/pwr

Enclosures: as stated



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

09 DEC 21 PM 4:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

November 5, 2009

THOMAS S GIBSON
RISH GIBSON & SCHOLZ, PA
P O BOX 39
PORT ST LUCIE, FL 32457

SUBJECT: SEMINOLE OAKS, LLC
Ref. Number: W09000049224

We have received your document for SEMINOLE OAKS, 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 name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a foreign limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations. Therefore, the limited liability company must select an alternate name for use in the state of Florida. Also, please note that adding "of Florida" or "Florida" to the end of the name is not acceptable.

Please insert the alternate name in the space provided on the application form. You must also attach a copy of the written consent of the managers or managing members adopting the alternate name for Florida. For your convenience, we are enclosing a fill-in-the-blank form for you to complete and return to our office for processing.

The alternate name must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The word "Limited" may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable limited liability company suffixes in Florida: "Limited Company," "L.C.," and "LC."

The document number of the name conflict is J19066 (SEMINOLE OAKS, INC).

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) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 909A00034907

**WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE
STATE OF FLORIDA**

We, the undersigned, do hereby certify that we are the Managers and/or Managing
Members of Seminole Oaks, LLC
(Name of Limited Liability Company)

a limited liability company duly organized and existing under the laws of
Georgia
(State or Country of Organization)

Because the name of this foreign limited liability company does not satisfy the
requirements of the s. 608.406, F.S., the limited liability company hereby adopts the
following name to transact business in the state of Florida:

Seminole Oaks Partners, LLC
(Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability
Company, L.L.C., or LLC.)

Date: December 1, 2009

Signature(s) of Manager(s) and/or Managing Member(s):

Michael Hammond managing member

**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. SEMINOLE OAKS, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

Seminole Oaks Partners, 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. Georgia 3. 20-3708614
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 10/24/2005 5. perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")

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

7. 324 Marina Drive, Port St. Joe, FL 32456

(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:

Philip A. Jones, Managing Member, 324 Marina Dr., Port St. Joe, FL 32456

Ralph P. Rish, Managing Member, 324 Marina Dr., Port St. Joe, FL 32456

Michael Hammond, Managing Member, 324 Marina Dr., Port St. Joe, FL 32456

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: any lawful purpose

Philip A. Jones
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.)

Philip A. Jones
Typed or printed name of signee

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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**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:

Seminole Oaks, LLC

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

Seminole Oaks Partners, LLC

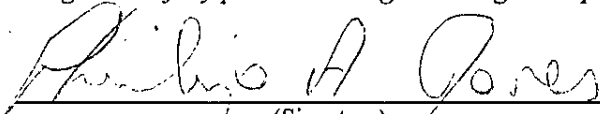
2. The name and the Florida street address of the registered agent and office are:

Philip A. Jones
(Name)

324 Marina Drive
Florida Street Address (P.O. Box NOT ACCEPTABLE)

Port St. Joe, FL 32456
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.


(Signature)

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

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DIVISION OF CORPORATIONS
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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

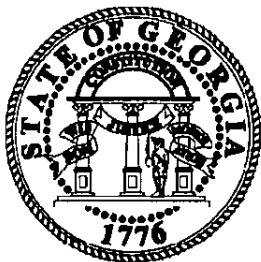
SEMINOLE OAKS, LLC

Domestic Limited Liability Company

was formed or was authorized to transact business on 10/24/2005 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 30th day of October, 2009

Karen C Handel
Secretary of State