# 1528000000001M

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(2000)
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G. MCLEOD

FEB 23 2010

**EXAMINER** 



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02/23/10--01014--803 \*\*100.00

02/23/10--01014--004 \*\*25.00

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SECRETARY OF STACE DIVISION OF CORPORATION

#### **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Poppell, LLC Name	of Limited Liability Company
	ty Company for Authorization to Transact Business in Florida," Certificate of ve referenced foreign limited liability company to transact business in Florida
Please return all correspondence concerning this matter	er to the following:
Adam O. Kisw	Name of Person
The Kirwan	Firm/Company
301 North Fernere	Address Suite C
Oclando, FL	32803 City/State and Zip Code
a Kirwan & Kirwan law E-mail address: (to	be used for future annual report notification)
For further information concerning this matter, please	call:
Kellie Gault Name of Person	at (407) 210-6622  Area Code & Daytime Telephone Number
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 S	

### 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;

POPPELL, LLC		
(Name of foreign limited liability company)		
Delaware 3. 59-3577068		
Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)		
(Date of Organization)  (Date of Organization)  (Duration: Year limited liability company will cexist or "perpetual")	ease	to
Upon qualification		
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)		
911A-MAR WALT DRIVE 1034 man Walt Drive, Suite 200	. :"	D
FORT WALTON BEACH FL 32547	5	VISI
(Street address of principal office)	<del>ল</del>	<del>- 오</del> ☆
	3 22	육동
If limited liability company is a manager-managed company, check here		CON
The name and usual business addresses of the managing members or managers are as follows:	PH 12:	- TO 1
SAMUEL E POPPELL	26	A O
911A MAR WALT DRIVE 1034 man welt Drive Scule 200		7A
FORT WALTON BEACH FL 32547		
Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having cust the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign translation of the certificate under oath of the translator must be submitted.)		
Nature of business or purposes to be conducted or promoted in Florida:		
Investments		
SAmuel E. Pypell		
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

SAMUEL E POPPELL

## 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.

The name of the Limited Liability Company is:
POPPELL, LLC
The name and the Florida street address of the registered agent and office are:
SAMUEL E POPPELL
(Name)
911A MAR WALT DRIVE 1034 man Walt Drive, Ste 200
Florida street address (P.O. Box <u>NOT</u> ACCEPTABLE)
FORT WALTON BEACH FL 32547
(City/State/Zip)
wing been named as registered agent and to accept service of process for the above stated limited bility company at the place designated in this certificate, I hereby accept the appointment as

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, F.S.

Symuel E. Paypell
(Signature)

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

## Delaware

PAGE 1

#### The First State

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

DELAWARE, DO HEREBY CERTIFY "POPPELL, 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 TWENTY-NINTH DAY OF JANUARY, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID "POPPELL,
LLC" IS A SERIES LIMITED LIABILITY COMPANY.

4782598 8300E

100084847

AUTHENTICATION: 7787310

DATE: 01-29-10

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