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T. HAMPTON
MAY 2 7 2010
EXAMINER

COVER LETTER

	sign of Corporations
SUBJECT:	SHALENE LLE
	Name of Limited Liability Company
The enclosed Existence, an	"Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of d 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:
	Name of Person
	SHALENE ZLC Firm/Company
	Firm/Company
	P.O. Box 266 Address
	Address
	TABER NASH ColorADO 80478 City/State and Zip Code
	BJL 118. LIVE. Com E-mail address: (to be used for future annual report notification)
For further in	formation concerning this matter, please call:
	BARY J. Lockey at (970) 887 - 0821 Name of Person Area Code & Daytime Telephone Number
Divis Regi P.O.	LING ADDRESS: sion of Corporations bitration Section Box 6327 Clifton Building hassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
	a check for the following amount:
<u></u> \$1	25.00 Filing Fee \$\sum \\$130.00 Filing Fee & \sum \\$155.00 Filing Fee & \sum \\$160.00 Filing Fee, Certificate Copy of Status & Certified Copy



April 27, 2010

BARRY J LOCKEY P O BOX 266 TABERNASH, CO 80478

SUBJECT: SHALENE, LLC Ref. Number: W10000020454

We have received your document for SHALENE, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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: 610A00010436

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: (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "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. Colon 400 3. 27-1334/13 (FEI number, if applicable) company is organized) 4. 11-18- 2009 (Date of Organization) exist or "perpetual" 7. P.O. Box 266 -132 OEER PATH (CR 8521) TABLEMANSH Co 80478
(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 BARRY J. OR DIXIELLOCKEY 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: AENTAL PROPERTY - INVESTMENTS Signature of a member of 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.) BARRY J. Lockey
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:
SHALENE, 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 FLOYD (Name)
12021 FLINTLOUK LWI FT. MYERS, FL. 33912 Florida Street Address (P.O. Box NOT ACCEPTABLE)
FT. MYERS FL 339/2 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)



OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE

I, Bernie Buescher, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

Shalene, LLC

is a **Limited Liability Company** formed or registered on 11/18/2009 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20091607030.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 04/16/2010 that have been posted, and by documents delivered to this office electronically through 04/21/2010 @ 08:48:39.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Denver, Colorado on 04/21/2010 @ 08:48:39 pursuant to and in accordance with applicable law. This certificate is assigned Confirmation Number 7630567.



Secretary of State of the State of Colorado

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**********End of Certificate****************************

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Certificate Confirmation Page of the Secretary of State's Web site, http://www.sos.state.co.us/biz/CertificateSearchCriteria.do entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, http://www.sos.state.co.us/click Business Center and select "Frequently Asked Questions."