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NOV -9 2010

EXAMINER

COVER LETTER

SUBJECT: Moderal Design 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: TELL HELLAND TELLIFICATION	TO: Registration Section Division of Corporations	
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: Tell Hell	SUBJECT: MODVAR OF SIGNS OF TENNESSEE, LLC Name of Limited Liability Company	
Name of Person MOUNTAL RECIONS OF TEXNICOSEE, LLC Firm/Company 8 19 WOODLAND ST Address MASHVILLE TO 37706 City/State and Zip Code TENHELM C MAC COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: WHOOL AND Area Code & Daytime Telephone Number		
Name of Person MOBULAL RECIENS OF TENNESSE, UC Firm/Company 8 19 WOODLAND ST Address City/State and Zip Code TENNESS (to be used for future annual report notification) For further information concerning this matter, please call: Name of Person Area Code & Daytime Telephone Number	Please return all correspondence concerning this matter to the following:	
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Address MASHVILLE TN 37706 City/State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: MASHVILLE TN 37706 E-mail address: (to be used for future annual report notification) Area Code & Daytime Telephone Number		
Address MASHVILLE TN 37706 City/State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: MASHVILLE TN 37706 E-mail address: (to be used for future annual report notification) Area Code & Daytime Telephone Number	MODULAR REGIONS OF TENNESSEE, LLC	
Address Address	Firm/Company	
Address Address	819 WOODLAND ST	
City/State and Zip Code ### Code #### Code ###################################		
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E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (b/5) 844-1912 Name of Person Area Code & Daytime Telephone Number	City/State and Zip Code	-
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For further information concerning this matter, please call: Content	the control of the c	
Name of Person Area Code & Daytime Telephone Number	For further information concerning this matter, please call:	
, · · ·	LEE WATSON at (6/5) 844-7912 00	
MAILING ADDRESS. STREET ADDRESS.	Name of Person Area Code & Daytime Telephone Number	
Division of Corporations Division of Corporations Division of Corporations	MAILING ADDRESS: STREET ADDRESS: Division of Corporations Division of Corporations	
Registration Section Registration Section	Registration Section Registration Section	
P.O. Box 6327 Clifton Building		
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301		
Enclosed is a check for the following amount:	Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$130.00 Filing Fee \$ \$155.00 Filing Fee \$ \$160.00 Filing Fee, Certificate	\$125.00 Filing Fee \$130.00 Filing Fee & \$160.00 Filing Fee, Certificate	

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 LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	REGISTER A FOREIGN
1. Molular Design Limited Liability Company; must include "Limited Liability Company," "L.L.C.,"	
(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 atta consent of the managers or managing members adopting the alternate name. The alternate name must include	
Company," "L.L.C," "LLC.")	
2. (Jurisdiction under the law of which foreign limited liability 3. (FEI number, if applicable	,
company is organized) (FEI number, if applicable)
4. $\frac{\gamma}{ }$ (Date of Organization) 5. $\frac{300}{ }$ (Duration: Year limited liability comparation)	
4. 7/// 5. ODI (Duration: Year limited liability comparexist or "perpetual")	ny will cease to
6.	
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
- OIO III ON MIN ST	29.8
1. 8/9 WOOVLAWD ST	
7. 819 WoodLAND ST NAGHVIUE, TN 37206 (Street Address of Principal Office)	1 b
· · · · · · · · · · · · · · · · · · ·	
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 for	تعالق الأows:مالة
TEO HELM - 819 WOODLAND ST, NASHVILLE, T	
jevings of moranion of the structure,	1- 5100
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official hav	ing 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 fore	
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:	2
INSTALLATION (
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. I am aware that any false information sub document to the Department of State constitutes a third degree felony as provided for in s.8	
TEO HEEM	
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:		
MODULAR DESIGNED OF TEMPESSEE, 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:		
KENNETH HAUMH (Name)	20 M NOV S空港音音 TALL AHA	
	NOV-	TO A MANUAL TO A M
5660 John 6/VENS ROAD Florida Street Address (P.O. Box NOT ACCEPTABLE)	8 PK	e de la constante de la consta
(0/4/1/41) - 27/29		generality *Couper
CHAST VIEW FL SUSSI	_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.

(Signature)

\$ 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 TENNESSEE Tre Hargett, Secretary of State

Division of Business Services

William R. Snodgrass Tower 312 Rosa L. Parks AVE, 6th FL Nashville, TN 37243-1102

LEE WATSON

3813 GREEN HILLS VILLAGE DR Nashville, TN 37215

November 2, 2010

Request Type: Certificate of Existence/Authorization

Issuance Date: 11/02/2010

Request #:

0024463

Copies Requested:

Document Receipt

Receipt #: 272363

Filing Fee:

\$20.00

Payment-Check/MO - PASCO OF TENNESSEE INC, Nashville, TN

\$20.00

Regarding:

MODULAR DESIGNS OF TENNESSEE, LLC

Filing Type:

Limited Liability Company - Domestic

Charter/Qualification Date: 05/11/2001

Status:

Active

Duration Term: Expires: 05/04/3001

Control #:

408048

Date Formed:

05/11/2001

Formation Locale: Davidson County

Inactive Date:

CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

MODULAR DESIGNS OF TENNESSEE, LLC

- * is a Limited Liability Company duly formed under the law of this State with a date of incorporation and duration as given above:
- * has paid all fees, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business:
- * has filed the most recent corporation annual report required with this office;
- * has appointed a registered agent and registered office in this State;
- * has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Tre Hargett, Secretary of State **Business Services Division**

Processed By: Sheila Keeling