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T. HAMPTON

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EXAMPLE P

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Eastgate L.L.C. 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:		
Steve and Bonnie Thompson		
Eastgate L. L. C.		
64 Windswept Waters		
Kimberling City, Mo 65686 City/State and Zhp Code		
Oware @ prote loo. net E-mail address (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Bonnie Thompson at (417) 139 5969 Name of Person Area Code & Daytime Telephone Number		
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301		
Enclosed is a check for the following amount: \$\Bigsim \mathbb{\text{\$\subset\$125.00 Filing Fee}} \Bigsim \mathbb{\text{\$\subset\$\$\text{\$\subset\$}\$}\$ \text{\$\subset\$\$\text{\$\subset\$}\$}\$ \text{\$\subset\$\$\text{\$\subset\$}\$}\$ \text{\$\subset\$\$\text{\$\subset\$}\$}\$ \text{\$\subset\$\$\text{\$\subset\$}\$}\$ \text{\$\subset\$\$\subset\$\$\text{\$\subset\$}\$}\$ \text{\$\subset\$\$\subset\$\$\text{\$\subset\$}\$}\$ \text{\$\subset\$\$\subset\$\$\subset\$\$\text{\$\subset\$}\$}\$ \text{\$\subset\$\$\subset\$\$\subset\$\$\subset\$\$\text{\$\subset\$}\$}\$ \$\subset\$\subset\$\$\subset\$\$\subset\$\$\subset\$\$\subset\$\$\subset\$\$\subset\$\$\subset\$\$\subset\$\$\subset\$\$\subset\$\$\subset\$\$\subset\$\$\subset\$\$\subset\$\$\subset\$\$\subset\$\s		

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

_	ed, do hereby certify that we are the Managers and/or Man	
Members of	Eastgate L.L.C.	,
	(Name of Limited Liability Company)	
	company duly organized and existing under the laws of	
Mis	SSOUP (or Country of Organization)	
(State	or Country of Organization)	
Because the name	of this foreign limited liability company does not satisfy the	he
requirements of th	e s. 608.406, F.S., the limited liability company hereby add	opts the
following name to	transact business in the state of Florida:	
East	agte Cape Coval, L.L.C aired liability company in Florida. NOTE: Name must end with Limited Liabi	
(Name to be used by lim Company, L.L.C., or LL	used liability company in Florida. NOTE: Name must end with Limited Liabi .C.)	ility
Date:	2-11	
Signature(s) of Ma	anager(s) and/or Managing Member(s):	
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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: Eastagte, LL. 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 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.") (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) (Duration: Year limited liability company will cease exist or "perpetual") (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 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: 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: 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 submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

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:
Eastgate, L.L.C.
J ,
If unavailable, the alternate to be used in the state of Florida is:
Eastgate Cape Coral L.L.C.
J) /
2. The name and the Florida street address of the registered agent and office are:
Eastaate L.L.C.
Bonne Thompson
Bonne Tombingson 1005 NW 37th Avenue
Florida Street Address (P.O. Box NOT ACCEPTABLE)
Cape Coral _{FL} 33993
/ 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.

Dennie Monpoon
(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 MISSOURI



Robin Carnahan Secretary of State

CORPORATION DIVISION CERTIFICATE OF GOOD STANDING

I, ROBIN CARNAHAN, Secretary of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

EASTGATE, L.L.C. LC0020730

was created under the laws of this State on the 6th day of July, 1998, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 15th day of October, 2010

n Camahan

Secretary of State

Certification Number: 13257132-1 Reference:

Verify this certificate online at https://www.sos.mo.gov/businessentity/soskb/verify.asp