M11000000252

| • |
|---|
| (Requestor's Name) |
| (Address) |
| (Addiess) |
| (Address) |
| (City/State/Zip/Phone #) |
| (City/State/Zip/F110/16 #) |
| PICK-UP WAIT MAIL |
| (D F. Alb. Alayse) |
| (Business Entity Name) |
| |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
| |
| |
| |
| |
| |
| |
| <u> </u> |

Office Use Only



500191983525

01/20/11--01012--020 **125.00

TO ACKNOWLEDGE SUFFICIENCY OF FILING DEPARTMENT OF STATE STAT

B. KOHR
JAN 2 0 2011

EXAMINER

SECRETARY OF STATE VISION OF CORPORATION

CORPDIRECT AGENTS, INC. (formerly CCRS) 515 ÉAST PARK AVENUE TALLAHASSEE, FL 32301 222-1173 FILING COVER SHEET ACCT. #FCA-14 **CONTACT: KATIE WONSCH** DATE: 01/20/2011 **REF. #:** 000173.140566 CORP. NAME: G8 NPR, LLC () ARTICLES OF INCORPORATION () ARTICLES OF AMENDMENT () ARTICLES OF DISSOLUTION () ANNUAL REPORT () TRADEMARK/SERVICE MARK () FICTITIOUS NAME (XX) FOREIGN QUALIFICATION () LIMITED PARTNERSHIP () LIMITED LIABILITY () REINSTATEMENT () MERGER () WITHDRAWAL () CERTIFICATE OF CANCELLATION () OTHER: STATE FEES PREPAID WITH CHECK# 538205 FOR \$ 125.00 **AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:** COST LIMIT: \$____ PLEASE RETURN: () CERTIFIED COPY () CERTIFICATE OF GOOD STANDING (XX) PLAIN STAMPED COPY

Examiner's Initials

() CERTIFICATE OF STATUS

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. G8 NPL LLC (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. DELAWAKE (Jurisdiction under the law of which foreign limited liability) 3. 27-1552687 (FEI number, if applicable) |
| company is organized) |
| 4. 12/23/2009 5. PERFETURE (Date of Organization) 5. Operation: Year limited liability company will cease to |
| (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") |
| 6. (Date first transacted business in Florida, if prior to registration.) |
| (See sections 608.501 & 608.502 F.S. to determine penalty liability) |
| 7. 999 COLLANTE DE #25 |
| 7. 999 CONDITION OF THE OCH THE STATE OF THE OFFICE OF Principal Office) |
| (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: |
| G8 HOWINGS, INC. |
| 999 CAPALITE DR #215 |
| LADORA RANCH, CA 92694 |
| 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 each of the translator must be submitted.) |
| 11. Nature of business or purposes to be conducted or promoted in Florida: NEW ESTATE |
| OWNERSITIP MANKEMENT |
| - K-Che |
| 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.) |
| KIRT MINIX. |
| 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.

| . The name of the Limited Liability Company is: | |
|---|------|
| G8 NOR, LLC | ···- |
| f unavailable, the alternate to be used in the state of Florida is: | |
| . The name and the Florida street address of the registered agent and office are: | |
| NRAI Services, Inc. | |
| (Name) | |
| 2731 Executive Park Drive, Suite 4 | |
| Florida Street Address (P.O. Box NOT ACCEPTABLE) | |
| Weston / FL / 33331 | |
| 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) Jose Castellanos, Asst. Secretary

\$ 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

The First State

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

DELAWARE, DO HEREBY CERTIFY "G8 NPR, 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 NINETEENTH DAY OF JANUARY, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "G8 NPR, LLC"
WAS FORMED ON THE TWENTY-THIRD DAY OF DECEMBER, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

4769413 8300

110056209

Jeffrey W. Bullock, Secretary of State

DATE: 01-19-11

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