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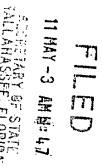
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D. BRUCE
MAY 0 4 2011
EXAMINER

COVER LETTER

TO:

TO: Registration Section Division of Corporations	
SUBJECT: Five Talents Properties of FL IV, LLC	
Name of Limited Liability Company	
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Existence, and check are submitted to register the above referenced foreign limited liability company."	
Please return all correspondence concerning this matter to the following:	
Kristen E. Simmons	
Name of Person	
Oshins & Associates, LLC	
Firm/Company	
1645 Village Center Circle, Suite 170	
Address	
Las Vegas, NV 89134	A T
City/State and Zip Code	S - 3
ksimmons@oshins.com	men 🚍 🥅
E-mail address: (to be used for future annual report notification	
For further information concerning this matter, please call:	RIBA
Kristen E. Simmons at (702) 341-6000) x 7
Name of Person Area Code & Daytime Telephone Numb	per
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle	
Tallahassee, FL 32301	
Enclosed is a check for the following amount: \$\int_{125.00}\$ \text{Filing Fee} \int_{130.00}\$ \text{Filing Fee & Certificate of Status} \$\int_{155.00}\$ \text{Filing Fee & Certified Copy} \int_{160.00}\$ \text{of Status}	Filing Fee, Certificate is & Certified Copy

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 FOREIC LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	MITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Five Talonts Proportion of FLOVILL C
ì.	Five Talents Properties of FL IV, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
co	f name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written onsent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability ompany," "L.L.C," "LLC.")
2.	Nevada 3.
	(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4.	March 3, 2011 5 Perpetual
	(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.	961 South Ferdon Blvd
	Crestview, FL 32536
	(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:
	Judith Ring
	PO Box 2119
	Crestview, FL 32536
the tra	D. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in a jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a unslation of the certificate under oath of the translator must be submitted.) 1. Nature of business or purposes to be conducted or promoted in Florida: Investment
	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 periors that the facts stated herein are true. Lam 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

Judith Ring, Manager

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 Co	empany is:		
Five Talents Properties of F	FL IV, LLC		
If unavailable, the alternate to be used in	the state of Florida is:		
2. The name and the Florida street addre	ess of the registered agent and office are:		
Judith Ring			
	(Name)		
806 Gavernie Cour	t	TARAY	- }
Florida Street A	-3	-	
Crestview	_{FL} 32539	FES	
	City/State/Zip	ORNE L	<i>ل</i> مصد،
		-	

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)

SECRETARY OF STATE





I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, FIVE TALENTS PROPERTIES OF FL IV, LLC, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since March 3, 2011, and is in good standing in this state.

THE CO.

Electronic Certificate
Certificate Number: C20110311-0693
You may verify this electronic certificate
online at http://www.nvsos.gov/

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on March 11, 2011.

ROSS MILLER Secretary of State