#M11000004731

(Requestor's Na	ame)
(Address)	
(Address)	
(City/State/Zip/F	hone #)
PICK-UP WAI	T MAIL
(Business Entity	/ Name)
(Document Nun	nber)
Certified Copies Certifi	cates of Status
Special Instructions to Filing Officer:	

Office Use Only



100212227071

09/20/11--01019--019 **125.00

FILED
1 SEP 20 FM 12: 30
FYNE AND DE STATE

EXAMINER SEP 2 1 2011

Cushing, Morris, Armbruster & Montgomery, LLP

ATTORNEYS AT LAW
SUITE 4500
19: PEACHTREE STREET, N.E.
ATLANTA, GEORGIA 30303

writer's direct dial number/e-mail (404) 614-8119 / cgp@cmamlaw.com

TELEPHONE 404 521-2323

TELECOPIERS 404 658-9865 404 522-0607

September 15, 2011

VIA FEDERAL EXPRESS

Florida Department of State Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

Re: Qualification of TEFFCO, LLC in Florida

Dear Madam or Sir:

I am enclosing the original of the Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida for TEFFCO, LLC, together with a certificate of good standing for the company issued by the Wyoming Secretary of State's office. Please file this application and return a certificate of authority to me at your earliest convenience. I am also enclosing my firm's check No. 50846 in the amount of \$125.00 as payment for the filing fee.

Thank you for your attention to my request.

Yours sincerely,

Ceil G. Petersson Paralegal

CGP/ Enclosures

COVER LETTER

TO:

Registration Section

SUBJECT: TEFFCO, LLC	ame of Limited Liability Company
The enclosed "Application by Foreign Limited Li	ability Company for Authorization to Transact Business in Florida," Certificate of above referenced foreign limited liability company to transact business in Florida.
Please return all correspondence concerning this r	natter to the following:
Ceil G. Petersson	
	Name of Person
Cushing, Morris, Armbru	ster & Montgomery, LLP
	Firm/Company
191 Peachtree Street,	N.E Suite 4500
	Address
Atlanta, Georgia 30303	
	City/State and Zip Code
lmaddox@thomasen	t.com
E-mail address:	(to be used for future annual report notification)
For further information concerning this matter, ple	ease call:
Ceil G. Petersson	at (404) 521-2323 Area Code & Daytime Telephone Number
Name of Person	Area Code & Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount \$\sqrt{\$125.00}\$ Filing Fee \$\sqrt{\$130.00}\$ Filing I Certificate of St	Fee & \$155.00 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 REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

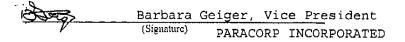
1. TEFFCO, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")
2. Wyoming (Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applicable)
4. September 1, 2011 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")
6. N/A (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 2181 Newmarket Parkway, S.E.
Marietta, Georgia 30067 (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:
Stanley E. Thomas 45 Ansley Drive Newnan, Georgia 30263
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: Site development
and other lawful purposes
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.)
Stanley E. Thomas

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.

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 dunes, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.



\$ 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 WYOMING Office of the Secretary of State

I, MAX MAXFIELD, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

TEFFCO, LLC

is a Limited Liability Company

formed or qualified under the laws of Wyoming did on **September 1, 2011**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2011-000607747**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 15th day of September, 2011 at 12:57 PM. This certificate is assigned 010748725.



May Madeido Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.