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W11-56860

J. BRYAN
NOV 2 8 2011
EXAMINER

### **COVER LETTER**

TO:	Registration Section Division of Corporations		
SUBJI		_C me of Limited Liability Company	
		pility Company for Authorization to Transact Business bove referenced foreign limited liability company to to	
Please	return all correspondence concerning this ma	atter to the following:	
	ROBERT H. HALL		
		Name of Person	
	LYNN VENTURES, LLC		
		Firm/Company	
	2600 HILLTOP FARMS	ROAD	T SECRE
		Address	TAF ASS
	APEX, NC 27502		FILED 2011 HOV 23 PH 3: 56 SECRETARY OF STATE SECRETARY OF LORID
		City/State and Zip Code	1.00 3.
	rhhall9890@bellsouth	net	
	E-mail address: (t	to be used for future annual report notification)	
For fur	ther information concerning this matter, pleas	se call:	
	ROBERT H HALL	at ( 919 ) 303-7402	
	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	
	sed is a check for the following amous  \$125.00 Filing Fee  \$130.00 Filing Fee  Certificate of State	e & \$155.00 Filing Fee & \$160.00 Filing Fe	



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

November 8, 2011

ROBERT H. HALL LYNN VENTURES, LLC 2600 HILLTOP FARMS ROAD APEX, NC 27502

SUBJECT: LYNN VENTURES, LLC

Ref. Number: W11000056860



A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan Regulatory Specialist II

Letter Number: 811A00025305

#### 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 I IMITED LIARII ITYCOMPANYTO TRANSACT RI KINIESS IN THE STATE OF ELORIDA

. I VNN VENTUDES II C
1. LYNN VENTURES, 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. NORTH CAROLINA 3, 56 1968856
(Jurisdiction under the law of which foreign limited liability company is organized)  (FEI number, if applicable)
4. 04/16/1996 5. 2050
(Date of Organization) (Duration: Year limited liability company will cause 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. 2600 HILLTOP FARMS ROAD, APEX, NC 27502
LORAL W
(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:
LONNIE C POOLE, JR, 700 N PENINSULA AVE, NEW SMYRNA BEACH FL 32169
ROBERT H HALL, 2600 HILLTOP FARMS RD, APEX, NC 27502
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 ranslation of the certificate under oath of the translator must be submitted.)
Nature of business or purposes to be conducted or promoted in Florida:
AIRCRAFT PURCHASES AND RENTALS
Robert HHall
Signature of a member or an authorized representative of a member.

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.)

ROBERT H HALL

(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the

### 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:			
LYNN VENTURES, 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:			_
LONNIE C POOLE, JR (Name)	SECR TALLA	2011 NOV 23	
700 N PENINSULA AVENUE Florida Street Address (P.O. Box NOT ACCEPTABLE)	FT3."		
NEW SMYRNA BEACH FL 32169  City/State/Zip	,	မှ မှ 56	O

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.

Lonnie C Poolo Le
(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)



## NORTH CAROLINA Department of the Secretary of State

### CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

### LYNN VENTURES, LLC

is a limited liability company duly formed under the laws of the State of North Carolina, having been formed on the 16th day of April, 1996, with its period of duration being DEC 2050.

I FURTHER certify that the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act; and that the said limited liability company has not filed articles of dissolution as of this date of this certificate.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 17th day of November, 2011.



Secretary of State

6 laine I. Marshall