(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MA	IL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	

900217372849

01/17/12--01054--026 ***130.00-

L. SELLERS

JAN 18 2012

EXAMINER

Office Use Only



Counsellors at Law

.

TRANSMITTAL

January 13, 2012

State of Florida Division of Corporations - Registration Section P.O. Box 6327 Tallahassee, FL 32314

RE: LONGVIEW HOLDINGS, LLC CLIENT: GERTRUD BROWNING

Enclosed please find:

- 1. CLIENT's Cover Letter
- 2. CLIENT's Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida
- 3.CLIENT's Certificate of Designation of Registered Agent/Registered Office
- 4. State of Wyoming Office of Secretary of State Electronic Certificate of Good Standing for **LONGVIEW HOLDINGS, LLC**.
- 5. Certified COPY from State of Wyoming Secretary of State

 Articles of Organization for G. B. PROPERTY HOLDINGS, LLC and
 Limited Liability Company Amendment to Articles of Organization
 to change name of entity G. B. PROPERTY HOLDINGS, LLC to
 LONGVIEW HOLDINGS, LLC.
- 6. Check #3454 in the amount of \$130.00

If you have any questions or concerns please call our office 386 252-2531

With best regards,

Rachelle Couture, Legal Assistant to

W. Denis Shelley, Equire

/rc

Enclosures

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: LONG VIEW HOLD, NG5 LLC 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:					
GERTRUD BROWNING Name of Person					
Name of Person					
Firm/Company					
1940 FAIRVIEW ShorES DR					
Address					
1940 FAIR VIEW Shores DR Address ORIANISO FI 32804 City/State and Zip Code bill8818@aol, com					
City/State and Zip Code					
b.118818@ao1.com					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
CERTRUS BRUWDING at 401, 299-6273 Name of Person Area Code & Daytime Telephone Number					
MAILING ADDRESS: STREET ADDRESS: Division of Corporations Division of Corporations					
Registration Section Registration Section P.O. Box 6327 Clifton Building					
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301					
Enclosed is a check for the following amount:					
\$125.00 Filing Fee \$\ \text{S130.00 Filing Fee & S155.00 Filing Fee & Certificate of Status} \text{Certified Copy} \text{S160.00 Filing Fee, Certificate of Status} \text{Certified Copy}					

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608503, FLO. LIMITED LIABILITY COMPANY TO TRANSACT BUS			R A FOREIGN
1. ONGVIEW /to	•		
(Name of Foreign Limited Liability Compa	any; must include "	Limited Liability Company," "L.L.C.," or 'L.L.C.	")
•			
(If name unavailable, enter alternate name adopted	i for the purpose of	transacting business in Florida and attach a copy	of the written
consent of the managers or managing members ad Company," "LL.C." "LL.C.")	opting the alternate	name. The alternate name must include "Limited	d Liability
		22 2011/10-	
2. Wyomina	31 <u>-</u>	27-2964387 (FEI number, if applicable)	
(Jurisdiction under the law of which foreign lim company is organized)	med Harmty	(rei numper, u appucable)	
1 Sent 4 2009	5	2 <i>03</i> 9	·
4. Sept 4 2009 (Date of Organization)		Duration: Year limited liability company will ce	ase to
/ / 20/2	e	exist or "perpetual")	
6. <u>/-/-20/2</u>	and and in Minarda	(Called to applicable of the Called	
(See sections 608.501 &	608.502 P.S. to de	if prior to registration.) stermine penalty liability)	
7. 1940 FAIRVIEW	Shore	es De	
ORLANDO FL.	3,2804	t	
(Si	treet Address of Pri	ncipal Office)	
8. If limited liability company is a manage	r-managed com	nany check here	
or an analy company is a manage	a madeged bom	pany, oneon hero	
9. The name and usual business addresses	of the managing	g members or managers are as follows:	
GERTRUS BROW.	1 416		
			
1940 MAIRVIEW	Shores	DR	
ORIANDO- FI	328C	04	
		- F.O	
 Attached is an original certificate of existence, no ne jurisdiction under the law of which it is organized. 			
anslation of the certificate under cath of the translator			2
1. Nature of business or purposes to be co	· 	noted in Ploside:	7
Proposes to be co	inducted of pron	mc	= M
roperly ranage	meni	_	
Chatoud	8 B101	n)hung 25	<u> </u>
Signature of a member	er or an authoriz	ed representative of a member.	ni .\$ 0 .
(In accordance with section 608.408(3), 1	F.S., the execution of	this document constitutes an affirmation under the	
		aware that any false information submitted in a degree felony as provided for in s.817.155, F.S.	1
SEXTR		e degree tetony as provided for in 8.817.133, r.s.	.,
	or printed name		

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:
LONGVIEW /to/DINES 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: () ENTINUE D. BROWNING
(Name)
1940 FAIRULEW Shures DR. Florida Street Address (P.O. Box NOT ACCEPTABLE)
OKLANDO FL 32804 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.

Gaton Drowling
(Signature)

S 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,

Longview Holdings, LLC is a Limited Liability Company

formed or qualified under the laws of Wyoming did on **September 4**, **2009**, comply with all applicable requirements of this office. This entity has been assigned entity identification number **2009-000574326**.

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 20th day of December, 2011 at 2:49 PM. This certificate is assigned 011311214.



Maj Massielo
Secretary of State

12 JAN 17 M & 19
SECRETARY OF STATE
NECKHARSEF FIORIN

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.