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FILED.

KIRK PALMER & THIGPEN, P.A.

Melanie J. Wright email mjwright@kptlaw.com

ATTORNEYS AT LAW
1300 BAXTER STREET
SUITE 300
CHARLOTTE, NORTH CAROLINA 28204
TELEPHONE (704) 332-8000
FACSIMILE (704) 332-8264

May 1, 2012

VIA FEDERAL EXPRESS

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

Re: Application for Authorization to Transact Business in Florida for

Madison Lumber Products, LLC

Ladies and Gentlemen:

On behalf of Madison Lumber Products, LLC (the "LLC"), please find enclosed herewith an executed original and one conformed copy of the Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida, together with a Certificate of Existence authenticated by the Georgia Secretary of State and the Certificate of Designation of Registered Agent/Registered Office. Also enclosed is our firm's check for \$160.00 in payment of the required \$100 filing fee, \$30 Certified Copy fee, \$5 Certificate of Status fee and \$25 Designation of Registered Agent fee.

Please file the enclosed Application upon your receipt of this letter and return evidence of the filing to me at my address listed above in the return Federal Express envelope enclosed for that purpose. Thank you for your cooperation.

Very truly yours,

Melanie J. Wright

Melanie GWright

For the Firm

MJW:kts

Enclosures

ce: Patrick C. Patton (via e-mail)

COVER LETTER

TO:

SUBJECT		me of Limited Liability Company	
		bility Company for Authorization to Transact Business in Florida," Cobove referenced foreign limited liability company to transact business	
Please retur	n all correspondence concerning this ma	atter to the following:	
	Melanie J. Wright		•
		Name of Person	4. 7. 7. 18. 18. 18. 18. 18. 18. 18. 18. 18. 18
	Kirk Palmer & Thigpen, P	.A	MAY-4 PM 4: 18
		Firm/Company	ス (4)
	4200 Baston Street, Suit	- 200	F 54
	1300 Baxter Street, Sui	Address	<u> </u>
	Charlotte, NC 28204		0
		City/State and Zip Code	
	E-mail address: (to be used for future annual report notification)	
For further	information concerning this matter, plea	se call:	
h /	olonio I Wright	at (704) 332-8000	
<u> </u>	elanie J. Wright Name of Person	Area Code & Daytime Telephone Number	
M	ALLING ADDDESS.	STREET ADDRESS:	
	AILING ADDRESS: vision of Corporations	Division of Corporations	
	egistration Section	Registration Section	
	O. Box 6327 Illahassee, FL 32314	Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
	is a check for the following amou 25.00 Filing Fee \$\int\$\$\$\$\$130.00 Filing Fe		
[_] _{*,}	Certificate of Sta	tus Certified Copy of Status & 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 FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT RUSINESS IN THE STATE OF FLORIDA:

	Madison Lumber Products, LLC
	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
cons	ame unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written ent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability upany," "L.L.C," "LLC.")
<u>(1</u> ;	Georgia 3. Not applicable urisdiction under the law of which foreign limited liability (FEI number, if applicable) umpany is organized)
4. <u>[</u>	cent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability apany," "L.L.C," "LLC.") Georgia Jecember 31, 2001 (Date of Organization) (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 6304 Peake Road
6	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. <u></u>	5304 Peake Road
<u>N</u>	Macon, GA 31210 (Street Address of Principal Office)
8. I	f limited liability company is a manager-managed company, check here
9. T	he name and usual business addresses of the managing members or managers are as follows:
F	Patrick C. Patton, Manager
	6304 Peake Road
N	Macon, GA 31210
the ju transk	attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in risdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a ation of the certificate under eath of the trunslator must be submitted.)
	Nuture of business or purposes to be conducted or promoted in Florida: real estate investments
<u>a</u>	nd leasing
	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.)

Typed or printed name of signee

Patrick C. Patton, Member/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 Company is:
Madison Lumber Products, 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:
NRAI Services, Inc.
(Name)
515 East Park Avenue
Florida Street Address (P.O. Box NOT ACCEPTABLE)
Tallahassee _{FL} 32301
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. NKAI Services, Inc. by Gignature (Signature) Lindsey Hernandez, Assistant Secretary \$ 100.00 Filling Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)

Control No. 0201469

STATE OF GEORGIA

Secretary of State

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Drive
Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

MADISON LUMBER PRODUCTS, LLC

Domestic Limited Liability Company

was formed or was authorized to transact business on 12/31/2001 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 1st day of May, 2012

B: P.h

Brian P. Kemp Secretary of State

Certification Number: 9038672-1 Reference: Chen/Santa Rosa Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp