

M97000000340

ETHRIDGE & KANARICK
A PROFESSIONAL CORPORATION
CERTIFIED PUBLIC ACCOUNTANTS
3500 PIEDMONT ROAD, N.E., SUITE 525
ATLANTA, GEORGIA 30305
404 266-9180
FAX 262-7046

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

97 JUN 12 PM 1:50

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

100002210831--3
-06/12/97--01131--012
***145.00 ***145.00

Re: Jacksonville 5 LLC

Gentlemen,

With regard to the above referenced Limited Liability Company I am submitting the following:

1. Application by a Foreign Limited Liability Company for Authorization to Transact Business in Florida.
2. Affidavit of Membership and Contributions of Foreign Limited Liability Company.
3. Certificate of Designation of Registered Agent/Registered Office.
4. Original Certificate of Organization from the Secretary of State of Georgia.
5. A check in the amount of \$140.00 to cover all required fees.

I believe that this will meet the requirement of section 608.503(1) of the Florida Statutes. Please return the original certificate with the approved documents.

Thank you for your cooperation.

700002195787--6
-05/30/97--01027--001
***140.00 ***140.00

Sincerely,

Richard I. Kanarick

cc: Lowell Smoker
enclosures

097-1286A

Name Availability	KWM
Document Examiner	KWM
Updater	KWM
Updater Verifier	KWM
W. P. Verifier	KWM

C. TAX _____
 FILING 250.00
 R. AGENT FEE 35.00
 C. COPY _____
 TOTAL 285.00
 N. BANK _____
 BALANCE DUE _____
 REFUND _____

1017



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

June 2, 1997

ETHRIDGE & KANARICK
ATTN: RICHARD I. KANARICK
3500 PIEDMONT ROAD, N.E., STE. 525
ATLANTA, GA 30305

SUBJECT: JACKSONVILLE 5 L.L.C.
Ref. Number: W97000012869

We have received your document for JACKSONVILLE 5 L.L.C. and your check(s) totaling \$140.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective April 23, 1997, the fees to qualify a foreign limited liability company total \$285.00 and breakdown as follows: \$250.00 filing fee for the application and affidavit and \$35 registered agent designation fee. An additional \$52.50 is due for each certified copy requested and an additional \$8.75 is due for each certificate of status requested.

A certificate of existence, 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 (904) 487-6967.

Kenny Manning
Corporate Specialist

Letter Number: 097A00029740

**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:

97 JUN 12 PM 1:50
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

1. JACKSONVILLE 5 L.L.C.
 (Name of foreign limited liability company must end with the words "limited company" or their abbreviation "L.C." if not so contained in the name at present.)

2. GEORGIA 3. 58-2291860
 (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. February 28, 1997 5. December 31, 2012
 (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")

6. AS SOON AS POSSIBLE
 (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))

7. 2860 BUFORD HIGHWAY, SUITE E-101
DULUTH, GA 30136
 (Street address of principal office)

8. List name, title, and business address of each managing member[MGRM] or manager[MGR] who will manage the foreign limited liability company in Florida: (attach additional page if necessary)

NAME & ADDRESS:	TITLE:	NAME & ADDRESS:	TITLE:
<u>LOWELL A. SMOKER</u>	<u>MGR</u>	_____	_____
<u>2860 BUFORD HIGHWAY</u>		_____	
<u>SUITE E-101</u>		_____	
<u>DULUTH, GA 30136</u>		_____	
_____		_____	
_____		_____	
_____		_____	
_____		_____	
_____		_____	
_____		_____	

**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 IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:

JACKSONVILLE 5 L.L.C.

2. The name and address of the registered agent and office is:

PAUL REYNOLDS

(Name)

6169 WINDLASS CIRCLE

(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

BOYTON BEACH, FL 33437

(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.


(Signature)

5/20/97
(Date)

Filing Fee: \$ 35 for Designation of Registered Agent

**AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN
LIMITED LIABILITY COMPANY**

The undersigned member or authorized representative of a member of JACKSONVILLE 5 L.L.C.
_____ deposes and says:

- 1) the above named limited liability company has at least two members

- 2) the total amount of cash contributed by the member(s) is \$ 1,920

- 3) if any, the agreed value of property other than cash contributed by member(s) is \$ -0-
A description of the property is attached and made a part hereto.

- 4) the amount of cash or property anticipated to be contributed by member(s) is \$ 1,920
This total includes amounts from 2 and 3 above.

- 5) the total amount of cash or property anticipated to be contributed by member(s) is \$ 1,920



Signature of a member or authorized representative of a member.

In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

**Secretary of State
Corporations Division
Suite 315, West Tower
2 Martin Luther King Jr. Dr.
Atlanta, Georgia 30334-1530**

DOCKET NUMBER : 971560912
CONTROL NUMBER : 9710458
DATE INC/AUTH/FILED: 03/05/1997
JURISDICTION : GEORGIA
PRINT DATE : 06/05/1997
FORM NUMBER : 211

RICHARD KANARICK
3500 PIEDMONT RD NE
STE 525
ATLANTA GA 30305

CERTIFICATE OF EXISTENCE

I, Lewis A. Massey, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

**JACKSONVILLE 5, L.L.C.
A GEORGIA LIMITED LIABILITY COMPANY**

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. 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.

Lewis A. Massey
LEWIS A. MASSEY
SECRETARY OF STATE

