

Document Number Only

1197000000367

CT CORPORATION SYSTEM

660 EAST JEFFERSON STREET

Requestor's Name
TALLAHASSEE, FL 32301

Address
222-1092

City State Zip Phone

CORPORATION(S) NAME

900002219579--7

-06/23/97--01061--019

****311.25 ****311.25

SP Florida, LLC

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
97 JUN 20 PM 11:55

- ☐ Profit
☐ NonProfit
☒ Limited Liability Co.
☒ Foreign
- ☐ Amendment
☐ Merger
☐ Dissolution/Withdrawal
☐ Mark
- ☐ Limited Partnership
☐ Reinstatement
☐ Annual Report
☐ Reservation
☐ Other
☐ Change of R.A.
☐ Fictitious Name Filing
- ☐ Certified Copy
☐ Photo Copies (3) XCUS
- ☐ Call When Ready
☒ Walk In 1197-367
☐ Mail Out 0001010380
- ☐ Call if Problem
☐ Will Wait
☐ After 4:30
☒ Pick Up

| | |
|-------------------|---------|
| Name Availability | OK 6-23 |
| Document Examiner | OK |
| Updater | OK |
| Verifier | OK |
| Acknowledgment | OK |
| W.P. Verifier | OK |

6-19-97

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97 JUN 19 AM 11:49
DIVISION OF CORPORATIONS



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

June 19, 1997

CT CORP. SYSTEM
660 E. JEFFERSON STREET
TALLAHASSEE, FL 32301

SUBJECT: SP FLORIDA, LLC
Ref. Number: W97000014386

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DIVISION OF CORPORATIONS
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We have received your document for SP FLORIDA, LLC and your check(s) totaling \$311.25. However, the document has not been filed and is being retained in this office for the following:

The name designated in your document is not available. Therefore, the limited liability company must adopt an alternate name for use in the state of Florida. To adopt an alternate name the entity must submit a resolution signed by a managing member or manager adopting the alternate name for use in the state of Florida. The alternate name must end with "L.L.C.," "L.C.," "Limited Liability Company" or "Limited Company."

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) 487-6020.

Tammi Cline
Document Specialist

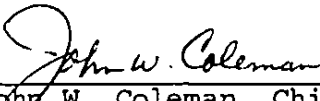
Letter Number: 397A00032779

RESOLUTION OF MEMBERS

I, the undersigned John W. Coleman, do hereby certify that this Resolution of the Members of SP Florida, LLC, a limited liability company duly organized and existing under the laws of the State of Tennessee, was duly adopted on June 19, 1997.

BE IT RESOLVED, that SP Florida, LLC, organized and existing in the State of Tennessee, hereby adopts the name SP Florida (San Pablo), LLC for use in Florida.

Dated: June 19, 1997.



John W. Coleman, Chief Manager

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DIVISION OF CORPORATIONS
JUN 20 09 1:55

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. SP Florida, LLC
(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. Tennessee
(Jurisdiction under the law of which foreign limited liability company is organized)
3. Applied For
(FEI number, if applicable)
4. June 18, 1997
(Date of Organization)
5. December 31, 2050
(Duration: Year limited liability company will cease to exist or "perpetual")
6. June 26, 1997
(Date first transacted business in Florida (See sections 608.501, 608.502 and 817.155, F.S.))
7. 6012 Johnson Chapel Road
Brentwood, Williamson County, Tennessee 37027
(Street address of principal office)
8. List and indicate in title space provided the name, title, and business address of each managing member [MGRM] or manager [MGR]. It is not necessary to list members.
(attach additional page if necessary)

| NAME & ADDRESS: | TITLE: | NAME & ADDRESS: | TITLE: |
|--------------------------------|------------|-------------------------------|------------------|
| <u>John W. Coleman</u> | <u>MGR</u> | <u>Alexis V. Lewis, Jr.</u> | <u>Secretary</u> |
| <u>6012 Johnson Chapel Rd.</u> | | <u>8027 Jefferson Highway</u> | |
| <u>Brentwood, TN 37027</u> | | <u>Baton Rouge, LA 70809</u> | |
| <u> </u> | | <u> </u> | |
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Filing Fee: \$ 52.50 for Application

JUN 05 1997
 SECRETARY OF STATE
 DIVISION OF CORPORATION

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of _____
SP Florida, LLC _____ 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 \$ 1,350,022.00
- 3) if any, the agreed value of property other than cash contributed by member(s) is
\$ 0.00 . A description of the property is attached and made a part hereto.
- 4) the total amount of cash or property anticipated to be contributed by member(s) is
\$ 1,350,022.00 . This total includes amounts from 2 and 3 above.

John W. Coleman, MANAGER

Signature of a member or authorized representative of a member.
(In accordance with section 608.402(3), Florida Statutes, the execution of this affidavit
constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

97 JUN 20 PM 1:55
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DIVISION OF CORPORATIONS

FILING FEE: \$ 250 for Articles of Organization and Affidavit

**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: SP Florida, LLC

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

C T CORPORATION SYSTEM
(Name)

c/o C T CORPORATION, 1200 South Pine Island Road,
(P.O. Box not acceptable)

Plantation, Florida 33324
(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.

C T CORPORATION SYSTEM

Jonnie Bryan
(Signature)
JONNIE BRYAN
SPECIAL ASSISTANT SECRETARY

6/19/97
(Date)

FILING FEE: \$ 35 for Designation of Registered Agent

97 JUN 20 PM 1:56
SECRETARY OF STATE
DIVISION OF CORPORATIONS

Secretary of State

Corporations Section

James K. Polk Building, Suite 1800

Nashville, Tennessee 37243-0306

ISSUANCE DATE: 06/18/1997
REQUEST NUMBER: 97169036
TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 06/18/1997
STATUS: ACTIVE
CORPORATE EXPIRATION DATE: PERPETUAL
CONTROL NUMBER: 0332853
JURISDICTION: TENNESSEE

TO:
WHITE & REASOR
3305 WEST END AVE
NASHVILLE, TN 37203

REQUESTED BY:
WHITE & REASOR
3305 WEST END AVE
NASHVILLE, TN 37203

CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT

"SP FLORIDA, LLC"

A LIMITED LIABILITY COMPANY DULY FORMED UNDER THE LAW OF THIS STATE WITH DATE OF
FORMATION AND DURATION AS GIVEN ABOVE;
THAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE
EXISTENCE OF THE LIMITED LIABILITY COMPANY HAVE BEEN PAID;
THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND
THAT ARTICLES OF TERMINATION OF THE EXISTENCE HAVE NOT BEEN FILED.

FOR: REQUEST FOR CERTIFICATE

ON DATE: 06/18/97

FROM:
LEGAL EAGLES ATTORNEY SERVICES
729 MAGNOLIA TRAIL

NASHVILLE, TN 37221-0000

RECEIVED: FEES
 \$10.00 \$0.00
TOTAL PAYMENT RECEIVED: \$10.00

RECEIPT NUMBER: 00002147367
ACCOUNT NUMBER: 00178891



Riley C Darnell

RILEY C. DARNELL
SECRETARY OF STATE