

Document Number Only

**M97000000407**

REQUESTOR'S NAME

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, Florida 32301

City

State

Zip

Phone

CORPORATION(S) NAME

FILED STATE  
SECRETARY OF CORPORATIONS  
DIVISION OF CORPORATIONS  
97 JUL 10 PM 12:37

300002236943--0

07/14/97 01048--005

\*\*\*\*\*8.75 \*\*\*\*\*8.75

*San Mar of Ft. Myers, L.L.C.*

300002236943--0

07/14/97 01048--004

\*\*\*\*\*337.50 \*\*\*\*\*337.50

☐ Profit

☐ NonProfit

☒ Limited Liability Company

☐ Foreign

☐ Amendment

☐ Merger

☐ Dissolution/Withdrawal

☐ Mark

☐ Limited Partnership

☐ Reinstatement

☒ Limited Liability Partnership

☒ Certified Copy

☐ Annual Report

☐ Reservation

☐ Photo Copies

☐ Other

☐ Change of R.A.

☐ Fictitious Name

☒ CUS

☐ Call When Ready

☒ Walk In

☐ Mail Out

☐ Call if Problem

☐ Will Wait

☐ After 4:30

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Thanks  
Melanie

7-10-97

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DIVISION OF CORPORATIONS

# 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:

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1. SONMAR OF FT. MYERS, 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. Please Note: L.L.C. is not an acceptable suffix in Florida.)

2. NORTH DAKOTA  
(Jurisdiction under the law of which foreign limited liability company is organized)

3. APPLIED FOR  
(FEI number, if applicable)

4. JUNE 30, 1997  
(Date of Organization)

5. 2027  
(Duration: Year limited liability company will cease to exist or "perpetual")

6. upon qualification  
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)

7. 15 BROADWAY, SUITE 401  
FARGO, ND 58102  
(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>RUSSELL D. MARING</u>	<u>MEMBER</u>	<u>DENIS J. OLSON</u>	<u>MEMBER</u>
<u>SONMAR MANAGEMENT CORP.</u>		<u>SONMAR DEVELOPMENT CORP.</u>	
<u>15 BROADWAY, SUITE 401</u>		<u>300 MAIN AVENUE, SUITE 112</u>	
<u>FARGO, ND 58102</u>		<u>FARGO, ND 58103</u>	
<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>	<u> </u>
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Filing Fee: \$ 52.50 for Application

(FL. - LLC 3289 - 3/10/97)

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

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The undersigned member or authorized representative of a member of \_\_\_\_\_

SONMAR OF FT. MYERS, 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 \$ 1000.00 .
- 3) if any, the agreed value of property other than cash contributed by member(s) is  
\$ .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  
\$ 300,000.00 . This total includes amounts from 2 and 3 above.



\_\_\_\_\_  
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.)

**Filing Fee: \$ 52.50 for 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: SONMAR OF FT. MYERS, L.L.C.

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

Susan J. Wimmer

(Signature)

4-25-97

(Date)

Assistant Vice President

(Title)

**FILING FEE: \$ 35 for Designation of Registered Agent**

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# State of North Dakota

## SECRETARY OF STATE



### CERTIFICATE OF GOOD STANDING

OF

SONMAR OF FT. MYERS, L.L.C.

The undersigned, as Secretary of State of the State of North Dakota, hereby certifies that SONMAR OF FT. MYERS, L.L.C., a North Dakota LIMITED LIABILITY COMPANY, was issued a certificate of organization on June 30, 1997 and, according to the records of this office as of this date, has paid all fees due this office as required by North Dakota statutes governing a North Dakota LIMITED LIABILITY COMPANY.

ACCORDINGLY the undersigned, as such Secretary of State, and by virtue of the authority vested in him by law, hereby issues this Certificate of Good Standing to

SONMAR OF FT. MYERS, L.L.C.

July 1, 1997.

Alvin A. Jaeger  
Secretary of State

SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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