M98000000088 Requestor's Name

(06)	Voctore			
	Address	1		
Tallahass	Phone # (850) 509-8631	1		
City/State/Zi	Phone #	1	- '	
	(350)509-3631		Office Use On	ly
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☐ Mail out ☐	Will wait Photocopy	18	Certificate of Status	. .
NEW FILINGS	AMENDMENTS			
Profit	Amendment			
NonProfit	Resignation of R.A., Officer/Dir	ector	700002 <i>4</i> -02/02/ *****33	179575 9801017017
	-	CCLOI	****33	7.50 ****337.50
Limited Liability	Change of Registered Agent			
Domestication	Dissolution/Withdrawal			
Other	Merger			
OTHERFILINGS	REGISTRATION/		PATT ->	•
Annual Report	QUALIFICATION			
	Foreign		CF-2	KC ***
Fictitious Name	Limited Partnership		. • .	
Name Reservation	Reinstatement		ン	- 51)
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<u> </u>	Trademark			11/
	Other		hi.	2/2/98
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CR2E031(1/95)	•		Examiner's Initials	ļ,
		1	0	. "

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:

		C	·· \=-1-1-7	و الم
1. Nam	Cash (ow F3 e of foreign limited liability company m	ust end with the wor	ds "limited company" or the	neir abbreviation "L.C." is no
so co	entained in the name at present.)			.
2	diction under the law of which foreign li	3	59-348 (FEI number	7251
(Juris comp	diction under the law of which foreign li any is organized)	nited liability	(FEI number	r, if applicable)
4	1-1-98	5	Porpetua	1
٦	/-[-98 (Date of Organization)		Duration: Year limited lia	bility company will ease to
6.	1-1-98			
	(Date first transacted business	•		
7	1020 E. Lafa	reffe St.,	Surte lob	
	Tallahassee	E/ 313)	
	(10000000000000000000000000000000000000	Street address of pri	ncipal office)	
	name, title, and business address of			
will 1	nanage the foreign limited liability NAME & ADDRESS:	company in Flor	rida: (attach additional NAME & ADDRES	
will 1	NAME & ADDRESS:	TITLE:	NAME & ADDRES	
will 1	5 5	Manager	NAME & ADDRES	
will 1	NAME & ADDRESS: Deff Swank 7906 McClure	TITLE:	NAME & ADDRES	
will 1	NAME & ADDRESS: Deff Swank 7906 McClure Tallahassee FL	TITLE:	NAME & ADDRES	
will r	NAME & ADDRESS: Deff Swank 7906 McClure	TITLE:	NAME & ADDRES	
will r	NAME & ADDRESS: Deff Swank 7906 McClure Tallahassee FL	TITLE:	NAME & ADDRES	
will r	NAME & ADDRESS: Deff Swank 7906 McClure Tallahassee FL	TITLE:	NAME & ADDRES	
will r	NAME & ADDRESS: Deff Swank 7906 McClure Tallahassee FL	TITLE:	NAME & ADDRES	
will r	NAME & ADDRESS: Deff Swank 7906 McClure Tallahassee FL	TITLE:	NAME & ADDRES	
will r	NAME & ADDRESS: Deff Swank 7906 McClure Tallahassee FL	TITLE:	NAME & ADDRES	

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

The undersigned member or authorized representative of a member of	7.00	
Cash (ow F3 (Quincy), L.L.C. deposes and says:	98 FEB	
1) the above named limited liability company has at least two members	DANIO: HO	
2) the total amount of cash contributed by the member(s) is	\$ 50,000	
3) if any, the agreed value of property other than cash contributed by member(s) is A description of the property is attached and made a part hereto.	\$ <u></u>	
4) the amount of cash or property anticipated to be contributed by member(s) is This total includes amounts from 2 and 3 above.	\$ 50,000 <u>.</u>	
5) the total amount of cash or property anticipated to be contributed by member(s) is	\$ <u>50,000</u> .	
Signature of a member or authorized representative of a memb	er.	

Filing Fee: \$250.00 for Application and Affidavit

affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, TELEPROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES,	Œ
UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMEN	Ħ
IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF	护
FLORIDA.	***
TEORIDA:	1
29	,
1. The name of the Limited Liability Company is: (ash Cow F3 (Quincy), L.L.C.	,
	>
Cash Cow F3 (Quincy), L.L.C.	_
	>
2. The name and address of the registered agent and office are:	
\mathcal{O}	
Santos Perez	
(Name)	
2000 Old Fort Dr.	
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)	
(a.v. aven de alante aver aven alan elevan elevan elevan elevan	
Tallahassee, FL 32301 (City/State/Zip)	
(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) 1-30-98
(Date)

Filing Fee: \$ 35 for Designation of Registered Agent



SECRETARY OF STATE

As Secretary of State, of the State of Louisiana, I do hereby Certif

the Articles of Organization of

CASH COW F3 (QUINCY), L.L.C.

Domiciled at NEW ORLEANS, LOUISIANA,

Were filed in this Office and a Certificate of Organization was issued on January 07, 1998,

I further certify that no Certificate of Dissolution has been issued.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

January 34, 1998

HBA 34604743K

Secretary of State

