| Dolntos F  Requesto  Requesto  A  TLIT FL 32  City/State/Zip                                                           | Suste 106B<br>ddress<br>301 942-8006<br>Phone #                                                                                                                                                            | Office Use Onl                                                    | SECRETARY<br>DIVISION OF CO             |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|-----------------------------------------|
|                                                                                                                        | E(S) & DOCUMENT NUM  To Fill (Ft Welto,  To Name) (D                                                                                                                                                       |                                                                   | O<br>OF STATE<br>PPORATIONS<br>PM 3: 26 |
| 2(Corporation 3(Corporation 4(Corporation                                                                              | ı Name) (D                                                                                                                                                                                                 | ####33 Occument #)                                                | <del>98 0189</del> 9022                 |
|                                                                                                                        | ck up time Photocopy                                                                                                                                                                                       | Certified Copy  Certificate of Status                             | 3                                       |
| Profit  NonProfit  NonProfit  Limited Liability  Other  OTHER ELINGS  Annual Report  Fictitious Name  Name Reservation | AMENDMENTS  Amendment  Resignation of R.A., Officer/ Dir  Change of Registered Agent  Dissolution/Withdrawal  Merger  REGISTRATION/  QUALIFICATION  Foreign  Limited Partnership  Reinstatement  Trademost | Name<br>Availab<br>Docum<br>Examil<br>Update<br>Update<br>Verifye | ent C                                   |
|                                                                                                                        | Trademark Other                                                                                                                                                                                            |                                                                   | <u>-</u>                                |

Examiner's Initials

## 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:

| Name                | cof foreign limited liability company matained in the name at present.)                         | F12(F+.                             | walton Beach) ds "limited company" or their abl                      | L.L. C.<br>breviation "L.C." if no | ot       |
|---------------------|-------------------------------------------------------------------------------------------------|-------------------------------------|----------------------------------------------------------------------|------------------------------------|----------|
| 2. (Jurisd compa    | iction under the law of which foreign I<br>ny is organized)                                     | imited liability 3.                 | 59-351058<br>(FEI number, if ap                                      | plicable) 98                       | SECRE!   |
| 4:                  | (Date of Organization)                                                                          | 5.                                  | Perpetual  Duration: Year limited liability of exist or "perpetual") | company will case to               | ARY OF S |
|                     | March 31, 10 (Date first transacted business                                                    |                                     |                                                                      | ည့်<br>55, F.S.) တ                 | TATE     |
| 7                   | 1020 E. Lafa,<br>Tallahassee, F                                                                 | -L 3230<br>(Street address of pri   | l ncipal office)                                                     |                                    | <br>-    |
| List na             | ame, title, and business address o                                                              | f each managing i                   | nember[MGRM] or manage                                               | er[MGR]who if necessary)           |          |
| . List na<br>will m | ame, title, and business address on the foreign limited liability NAME & ADDRESS:               | f each managing in y company in Flo | nember[MGRM] or manage rida: (attach additional page NAME & ADDRESS: | er[MGR]who if necessary) TITLE:    |          |
| . List na<br>will m | nanage the foreign limited liabilit                                                             | y company in Flo                    | rida: (attach additional page                                        | if necessary)  TITLE:              |          |
| . List na<br>will m | nanage the foreign limited liabilit                                                             | y company in Flor TITLE:  Manager   | rida: (attach additional page                                        | if necessary)  TITLE:              |          |
| . List na<br>will m | nanage the foreign limited liabilit  NAME & ADDRESS:  Jeff Swank                                | y company in Flo                    | rida: (attach additional page                                        | if necessary)  TITLE:              |          |
| . List na<br>will m | nanage the foreign limited liabilit  NAME & ADDRESS:  Deff Swank  7906 Mclure                   | y company in Flo                    | rida: (attach additional page                                        | if necessary)  TITLE:              |          |
| . List na<br>will m | nanage the foreign limited liabilit  NAME & ADDRESS:  Jeff Swank  7906 McClure  Tallahassee, FL | y company in Flo                    | rida: (attach additional page                                        | if necessary)  TITLE:              |          |
| . List na<br>will m | nanage the foreign limited liabilit  NAME & ADDRESS:  Jeff Swank  7906 McClure  Tallahassee, FL | y company in Flo                    | rida: (attach additional page                                        | if necessary)  TITLE:              |          |
| . List na<br>will m | nanage the foreign limited liabilit  NAME & ADDRESS:  Jeff Swank  7906 McClure  Tallahassee, FL | y company in Flo                    | rida: (attach additional page                                        | if necessary)  TITLE:              |          |
| . List na<br>will m | nanage the foreign limited liabilit  NAME & ADDRESS:  Jeff Swank  7906 McClure  Tallahassee, FL | y company in Flo                    | rida: (attach additional page                                        | if necessary)  TITLE:              |          |

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

| The undersigned member or authorized representative of a member of Lask Cou                                                                           | N F12         | <u>}                                    </u> |                                |
|-------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|----------------------------------------------|--------------------------------|
| (Ft. Walton Beach), 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                                                                                           | \$ 50         | . చి <mark>త</mark> ్తిన                     | DIVISI<br>SE                   |
| 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>                                     | 38 38 CK<br>YR TARY<br>YR TARY |
| 4) the amount of cash or property anticipated to be contributed by member(s) is This total includes amounts from 2 and 3 above.                       | \$ <u>50</u>  | P8 3: 26                                     | OF STATE<br>ORPORATIONS        |
| 5) the total amount of cash or property anticipated to be contributed by member(s) is                                                                 | \$ <u></u> \$ | <sup>7</sup> 000                             | <b>_</b> •                     |

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: \$250.00 for Application 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:                |                                  |
|-----------------------------------------------------------------|----------------------------------|
| Cash Cow FIZ CFt. Walton Beach,                                 | L.L.C.                           |
| 2. The name and address of the registered agent and office are: | orsivid                          |
| Santos Perez<br>(Name)                                          | FILED<br>RETARY OF<br>N OF OORPO |
| (P.O. Box or Mail Drop Box NOT ACCEPTABLE)                      | STATE<br>RATIONS<br>3: 26        |
| Tallahassee, FL 32301<br>(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) (Date)

Filing Fee: \$ 35 for Designation of Registered Agent



SECRETARY OF STATE

As Secretary of State, of the State of Louisiana, I do hereby Certify that the Articles of Organization of

CASH COW F12 (FT. WALTON BEACH), L.L.C.

Domiciled at NEW ORLEANS, LOUISIANA,

Were filed in this Office and a Certificate of Organization was issued on May 20, 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,

May 20, 1998

RAS 34643252K

Secretary of State

