### 07/03/1998 13:10 9042730040 PAGE ΩЗ 800000 TRANSMITTAL LETTER Qualification/Tax Lien Section To: Division of Corporations Dear Sir or Madam: The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida. 6000002593896-Please return all correspondence concerning this matter to the following: -07/21/98--01052--001 \*\*\*\*\*78.75 \*\*\*\*\*78.75 **600002593896--**-07/27/98--01130--005 Should you need to call someone concerning this matter, please call: Tames G. Pyle at (904) 273-6004 (Area Code & Daytime Telephone Number) **COURIER ADDRESS:** MAILING ADDRESS: Name Qualification/Tax Lien Section Qualification/Tax Lien Section Availability **Division of Corporations Division of Corporations** Document 409 E. Gaines St. P.O. Box 6327 Examiner Tallahassee, FL 32399 Tallahassee, FL 32314

Updater Updater Verifyer

Acknowledgemen W. P. Verifyer



#### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

July 21, 1998

JAMES G. PYLE 100 EXECUTIVE WAY, SUITE 206 PONTE VEDRA BEACH, FL 32803

SUBJECT: LAND SOUTH CONSTRUCTION, LLC

Ref. Number: W98000016549

We have received your document for LAND SOUTH CONSTRUCTION, LLC and your check(s) totaling \$78.75. 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.

We are enclosing the proper form(s) with instructions for your convenience.

There is a balance due of \$206.25.

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 (850) 487-6967.

Michelle Hodges Document Specialist

Letter Number: 098A00038607

### 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	LANDSOUTH CONSYN	LY CHON LLC		
(Nan so co	ne of foreign limited liability company ontained in the name at present.)	must end with the w		reviation "L.C." if not
	-		58	
2	GEORGIA	3.	<b>3</b> -2396999	
(Juris	diction under the law of which foreign any is organized)	n limited liability	(FEI number, if app	olicable)
	· · · · · ·		4 /	
4	5/28/98 (Date of Organization)	5.	12/3//40	
	(Date of Organization)		(Duration: Year limited liability co	ompany will cease to
	-11		cost of perpetual )	
6	8/1/98			
	(Date first transacted busine	ess in Florida. (See se	ctions 608.501, 608.502, and 817.15	55, F.S.)
7.	100 EXECUT	DUE INAY 5	41TE 206	
	PONTE VEDRA C	DCH, FR. 3208	2	
		(Street address of p	rincipal office)	
·. Diti	name, title, and business address	of each managing	member[MGRM] or manager	[MGR]who
will r	name, title, and business address nanage the foreign limited liabil NAME & ADDRESS:	lity company in Flo	member[MGRM] or manager orida: (attach additional page i	f necessary)  TITLE:
will r	nanage the foreign limited liabil  NAME & ADDRESS:	lity company in Flo TITLE: MGRM	orida: (attach additional page i	f necessary) TITLE:
will r	nanage the foreign limited liabil  NAME & ADDRESS:  Sames G. P416	TITLE:  MGRM	orida: (attach additional page i	f necessary) TITLE:
will 1	nanage the foreign limited liabil  NAME & ADDRESS:	TITLE:  MGRM	orida: (attach additional page i	f necessary) TITLE:
will r	nanage the foreign limited liabil  NAME & ADDRESS:  SAMES G. P416  104 EXECUTIVE WAT	TITLE:  MGRM	orida: (attach additional page i	f necessary) TITLE:
will 1	nanage the foreign limited liabil  NAME & ADDRESS:  Sames G. P416	TITLE:  MGRM	orida: (attach additional page i	f necessary) TITLE:
will 1	nanage the foreign limited liabil  NAME & ADDRESS:  SAMES G. P416  104 EXECUTIVE WAT	TITLE:  MGRM	orida: (attach additional page i	f necessary) TITLE:
will r	NAME & ADDRESS:  SAMES G. PYLE  100 EXECUTIVE WAT  PONTE VEORA BCH, FL  TAMES H. PAWS	lity company in Floring TITLE:  MGRM  MGRM  MGRM	orida: (attach additional page i	f necessary) TITLE:
will 1	nanage the foreign limited liabil  NAME & ADDRESS:  SAMES G. P416  104 EXECUTIVE WAT	lity company in Floring TITLE:  MGRM  MGRM  MGRM	orida: (attach additional page i	f necessary) TITLE:
will r	NAME & ADDRESS:  SAMES & PTLE  100 EXECUTIVE WAT  PONTE VEORA BCH, FL  SAMES H PAWS  5400 RIVERSION OR	lity company in Floring TITLE:  MGRM  MGRM  MGRM	NAME & ADDRESS:	f necessary) TITLE:
will r	NAME & ADDRESS:  SAMES G. PYLE  100 EXECUTIVE WAT  PONTE VEORA BCH, FL  TAMES H. PAWS	lity company in Floring TITLE:  MGRM  MGRM  MGRM	orida: (attach additional page i	f necessary)  TITLE:  DIVISION OF C.  98 JUL 27
will r	NAME & ADDRESS:  SAMES & PTLE  100 EXECUTIVE WAT  PONTE VEORA BCH, FL  SAMES H PAWS  5400 RIVERSION OR	lity company in Floring TITLE:  MGRM  MGRM  MGRM	NAME & ADDRESS:	f necessary)  TITLE:  DIVISION OF C.  98 JUL 27
will r	NAME & ADDRESS:  SAMES & PTLE  100 EXECUTIVE WAT  PONTE VEORA BCH, FL  SAMES H PAWS  5400 RIVERSION OR	lity company in Floring TITLE:  MGRM  MGRM  MGRM	NAME & ADDRESS:	f necessary)  TITLE:  DIVISION OF C.  98 JUL 27
will r	NAME & ADDRESS:  SAMES & PTLE  100 EXECUTIVE WAT  PONTE VEORA BCH, FL  SAMES H PAWS  5400 RIVERSION OR	lity company in Floring TITLE:  MGRM  MGRM  MGRM	NAME & ADDRESS:	f necessary) TITLE:
will r	NAME & ADDRESS:  SAMES & PTLE  100 EXECUTIVE WAT  PONTE VEORA BCH, FL  SAMES H PAWS  5400 RIVERSION OR	lity company in Floring TITLE:  MGRM  MGRM  MGRM	NAME & ADDRESS:	f necessary)  TITLE:  DIVISION OF C.  98 JUL 27
will r	NAME & ADDRESS:  SAMES & PTLE  100 EXECUTIVE WAT  PONTE VEORA BCH, FL  SAMES H PAWS  5400 RIVERSION OR	lity company in Floring TITLE:  MGRM  MGRM  MGRM	NAME & ADDRESS:	f necessary)  TITLE:  DIVISION OF C.  98 JUL 27

9. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the Secretary of State or the proper official having custody of records in the state under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

### **Secretary of State**

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

HALL BLOCH GARLAND & MEYER DUNCAN WALKER P.O.BOX 5088 MACON GA 31213-3199

DOCKET NUMBER CONTROL NUMBER DATE INC/AUTH/FILED: 05/28/1998 JURISDICTION PRINT DATE

981910245 . 9820796 GEORGIA 07/10/1998

211 FORM NUMBER

#### 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

#### LAND SOUTH CONSTRUCTION, LLC 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. - A - P - - - ·

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.

SECRETARY OF STATE



## 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 TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:	
LANDSOUTY CONSTRUCTION, LLC	
2. The name and the Florida street address of the registered agent and office are:	
JAMES 6. PYZE (Name)	SECRE DIVISION 98 JUL
Florida street address (P.O. Box NOT ACCEPTABLE)	TARY COR
PONYE VEDRA BCH. FL 32082 City/State/Zip	FSTATE PORATIONS

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)

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	·····		
LANDSU 4TH CONSTRUCTION, LLC certifies:			
1) the above named limited liability company has at least two members;			
2) the total amount of cash contributed by the member(s) is	\$ 110,	000.00	
3) if any, the agreed value of property other than cash contributed by member(s) is	\$	Ø. 9d-	
(A description of the property is attached and made a part hereto.)	Ψ		
and			
4) the total amount of cash and property contributed and anticipated to be contributed	\$ /10	840.00	
by member(s) is (This total includes amounts from 2 and 3 above.)	\$ <u>7.5</u>	<del></del>	
,			
James A. O.4			
Signature of a member or an authorized representative of a mem	ber.		
(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.)			
	١.	<b>9</b>	
JAMES G. PYLE	<u>8</u>	SEC	· <u></u> .
Typed or printed name of signee		N	
	27	85.E	
		주유 음·s	
	Ö	$\widetilde{\lambda}\overline{\lambda}$	

Filing Fee: \$250.00 for Application and Affidavit