

# 11980000000851

ACCOUNT NO. :

072100000032

REFERENCE

AUTHORIZATION

COST LIMIT : \$ 45

ORDER DATE : August 6, 1998

ORDER TIME: 11:33 AM

ORDER NO. : 918207-005

CUSTOMER NO: 4304045

600002610076--2

CUSTOMER:

Anne B. Mccoy, Legal Asst Arnall Golden & Gregory 2800 One Atlantic Center 1201 West Peachtree St. Atlanta, GA 30309-3450

NAME: AKANDA GROUP, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_ CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Cassandra Bryant

## 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.	AKANDA GROUP, LLC					
"L	(Name of foreign limited liability compa.C." if not so contained in the name at page 2.	nny must end wiresent. Please n	h the words "limited cor ote: "L.L.C." is not an ac	mpany" or their abbreviation ceptable suffix in Florida.)		
2	Delaware	3	•			
	(Jurisdiction under the law of which for company is organized)	eign limited lial	ility (FEI nun	nber, if applicable)		
4.	<u>May 22, 1998</u>		5. May 22, 2	2048		
	(Date of Organization	n)	(Duration: Year I cease to exist or "p	imited liability company will erpetual")		
6.	Upon qualification					
	(Date first transacted bu	siness in Florida	. (See sections 608.501,	608.502, and 817.155, F.S.)		
7.	7. 13575 58th St. North, Suite 123					
	Clearwater, Florida 33760					
		(Street address of	f principal office)			
8. ]	List name, title, and business add					
will	manage the foreign limited liabilit	y company in	Florida: (attach addi	tional page if necessary)		
will	manage the foreign limited liabilit  NAME & ADDRESS:	y company in	Florida: (attach addi NAME & AD	***		
will	5		,	***		
will	NAME & ADDRESS:	TITLE:	,	***		
will	NAME & ADDRESS:  Allen Roger Johnson	TITLE:	,	***		
will	NAME & ADDRESS:  Allen Roger Johnson  13575 58th St. North	TITLE:	,	***		
will	NAME & ADDRESS:  Allen Roger Johnson  13575 58th St. North  Suite 123	TITLE:	,	***		
will	NAME & ADDRESS:  Allen Roger Johnson  13575 58th St. North  Suite 123	TITLE:	,	***		
will	NAME & ADDRESS:  Allen Roger Johnson  13575 58th St. North  Suite 123	TITLE:	,	***		
will	NAME & ADDRESS:  Allen Roger Johnson  13575 58th St. North  Suite 123	TITLE:	,	***		



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

The undersigned member or authorized representative of a member of
AKANDA GROUP, 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 $\frac{1,000.00}{}$ .
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 \$_1,000.00 . 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.)

Stuart C. Johnson, Authorized Representative





PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES THE UNDERSIGNED LIMITED LIABILITY COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the lim	ited liability company is:	AKANDA GROUP,	LLC
			•
2. The name and addr	ess of the registered agent	and office is:	
	•		
	Corporation Service (	Company	
	(Name)		
	1201 Hays St., Suite (P.O. Box not accep		<del>_</del>
	Tallahassee, FL 323		<u>.</u>
	(City/State/Zip	))	

Having been named as registered agent and to accept service of process for the above state limited liability company at the place designated in this certificate, I hereby accept the appoint ment 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.

By: Deliorah 10. Skipper 8-6-98 (Date)

DEBORAH D. SKIPPER, AS IT'S AGENT

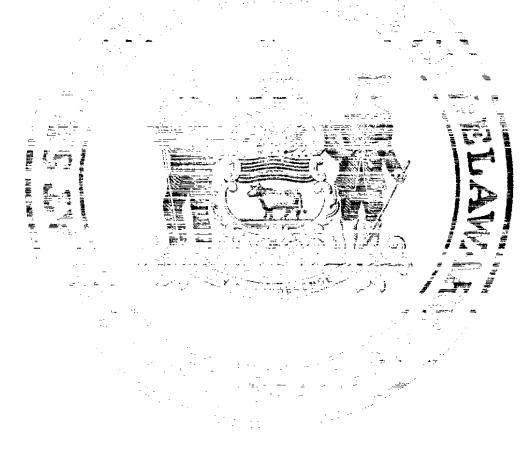
#### State of Delaware

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### Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATESOF OF DELAWARE, DO HEREBY CERTIFY "AKANDA GROUP, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING.

AND HAS A LEGAL EXISTENCE SO EAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRD DAY OF AUGUST, A.D. 1998.





Edward J. Freel, Secretary of State

AUTHENTICATION:

9232061

981302653

8300

2899825

DATE:

08-03-98