#### 990000077 Requestor's Name 315 SOUTH CALHOUN STREET Address Tallahassee, Florida 32301 Cir:/State/Zip Phone # Office Use Only 224-7000 CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Corporation Name) (Document =) (Contoration Name) N Pick up time U Maitour 1 Will wait Certificate of Stant Photocopy 2:3111 Amendment **800002885598--**-05/25/99--01040--0<u>1</u>9 NonFrofit\* Resignation of R.A., Officer/ Duranter \*\*\*\*346.25 \*\*\*\*346.25 Limited Liability Change of Registered Azers Domestication Dissolution/Withdrawai Ott.== الاحتوب OTHER FILINGS ALESTO THINKTING SU Annual Report 89 HAY 25 ALIDI SL **Είσυσους** Μαπα BECEINED Limited Partnership Name Reservation Rational States Trademark

# APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

THED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE			1
Governors Marketplace, LLC		<u>-</u>	رمي
Name of foreign limited liability company must end with the w	ords "limited company" o	r their abbreviat	ion "L.C." if no
o contained in the name at present.)			3
Georgia 3.	applied f		
urisdiction under the law of which foreign limited liability	(FEI num)	oer, if applicabl	e)
ompany is organized)	,	-	,
May 19, 1999	perpetual	<del></del> -	
(Date of Organization)	(Duration: Year limited	d liability compa	any will cease to
	exist or "perpetual")	- 1101110) <u>00</u> 11110	ing win coase ic
Upon filing of application			
(Date first transacted business in Florida. (See s	ections 608 501 608 502	and 817 155 E	18)
		, UI /.IU., I'	,
1777 Northeast Expressway, Suite 145			<u></u>
	<del></del>		
Atlanta, Georgia 30329	<u> </u>	 	
st name, title, and business address of each managir Il manage the foreign limited liability company in F	f principal office) ng member[MGRM] o lorida: (attach additio	or manager[Monal page if ne	[GR]who ecessary)
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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.)

# AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

The undersigned member or authorized representative of a member of	Governors M	arketplace, Li
certifies:		14/1.43
1) the above named limited liability company has at least one member;	- 	5
2) the total amount of cash contributed by the member(s) is	:	\$ 1,000.00
3) if any, the agreed value of property other than cash contributed by me (A description of the property is attached and made a part hereto.) and	ember(s) is	\$;
4) the total amount of cash and property contributed and anticipated to by member(s) is (This total includes amounts from 2 and 3 above.)	be contributed	<u>\$ 1,000.00</u>
Agora Developments, LLC, a Georgia limited I member of Governors Marketplace, LLC  By: W. John M. John	Liability_con	mpany, as a
Signature of a member or an authorized represents (in accordance with action 608.408(3), Florida Statutes, the cx affidavit constitutes an affirmation under the penalties of perjurstated herein are true.)	ecution of this	iber.
William M. Sulzbacher, President of Agora	ı Develo <del>p</del> men	ts, LLC
Typed or printed name of signs	ee -	<del></del>

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

1. The name of the Limited Liability Company is:

Governors Marketplace, LLC

2. The name and the Florida street address of the registered agent and office are:

William M. Sulzbacker

(Name)

7400 Baymeadows Way, Suite 107

Florida street address (P.O. Box NOT ACCEPTABLE)

Jacksonville

FL 32256

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)
William M. Sulzbacher

Filing Fee: \$ 35 for Designation of Registered Agent

### **Secretary of State**

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 DOCKET NUMBER : K91390211
CONTROL NUMBER : K920797
DATE INC/AUTH/FILED: 05/19/1999
JURISDICTION : GEORGIA
PRINT DATE : 05/19/1999

FORM NUMBER : 211

HOLLAND & KNIGHT
MARY BETH MCCORMICK
1201 WEST PEACHTREE ST., STE. 2000
ATLANTA, GA 30309

#### CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

## GOVERNORS MARKETPLACE, 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 filling 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.

This certificate relates only to the legal existence of the abovenamed 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.



Cathy Cox — Secretary of State