06/02/99 WED 14:26 FAX

Division of Corporations

# 9900008-1-6

### Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H99000013266 4)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 922-4003

From:

Account Name : FOWLER, WHITE, GILLEN, BOGGS, VILLAREAL & BANKER, P.A.

Account Number: 075410001562 : (813)228-7411 Phone : (813)228-9401 Fax Number

Mag- 816

### FOREIGN LIMITED LIABILITY COMPANY

The Thornestone Group, LLC

n kan bahas bahan bahan bahan bahan sa kan sa kan bahan b Certificate of Status Certified Copy Page Count \$337.50 Estimated Charge

Fax Audit No.: H99000013266 4 Page 1 of 4

## 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:

THE THORNESTONE GROUP, I (Name of foreign limited liability so contained in the name at presen	y company must end wit	th the w	ords "limited company" or their abbrevi	iation "L.C." if not	
DELAWARE (Jurisdiction under the law of we company is organized)	hich foreign limited liabi	3.	59-3578405 ( FBI number, if applicable	e)	<del></del>
JUNE 1, 1999 (Date of Organiza	tion)	5.	(Duration: Year limited liability comexist or "perpetual")	pany will cease to	MOISINIA
UPON FILING (Date first transa-	cted business in Florida.	(See sec	tions 608.501, 608.502, and 817.155, F.S	i) 2	Ct. Cour
8350 GLENGARRY PLACE NEW PORT RICHEY, FLORIS	DA 34655			-: -: -:	3
ist name, title, and busine	ess address of each	manag	rincipal office) ing member[MGRM] or manag Florida: (attach additional page	er[MGR]who if necessary)	<del>, -</del>
List name, title, and busine will manage the foreign lin	ess address of each nited liability compa	manag any in	ing member[MGRM] or manag	er[MGR]who if necessary) TITLE:	<del>,</del>
vill manage the foreign lin	ess address of each nited liability compa	manag any in .E:	ing member[MGRM] or manag Florida: (attach additional page	if necessary)	
vill manage the foreign lin	ess address of each nited liability compared in the compared i	manag any in .E:	ing member[MGRM] or manag Florida: (attach additional page	if necessary)	_
vill manage the foreign lin  NAME & ADDI  David G. Hack  8350 Glengari	ess address of each nited liability compared in the compared i	manag any in .E:	ing member[MGRM] or manag Florida: (attach additional page	if necessary)	_
vill manage the foreign lin  NAME & ADDI  David G. Hack  8350 Glengari	ess address of each nited liability compared in the compared i	manag any in .E:	ing member[MGRM] or manag Florida: (attach additional page	if necessary)	
vill manage the foreign lin  NAME & ADDI  David G. Hack  8350 Glengari	ess address of each nited liability compared in the compared i	manag any in .E:	ing member[MGRM] or manag Florida: (attach additional page	if necessary)	

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 in in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

Prepared by: David M. Doney, Esq.

P.O. Box 1438, Tampa, FL 33601

(813) 228-7411

Florida 8ar #: 892734

Fax Audit No.: H99000013266 4

Fax Audit No.: H99000013268 4 Page 2 of 4

1. The name of the Limited Liability Company is:

# 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.

The name a	and the Florida street address of the registered agent and office are:	J 66	DIVISIO
	David G. Hackett	- MU	IO NO
	(Name)	~	DO.
		PM	ŘΡ
	8350 Glengarry Place	**	XX
	Florida street address (P.O. Box NOT ACCEPTABLE)	32	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.

Filing Fee: \$35 for Designation of Registered Agent

Fax Audit No.: H99000013266 4 Page 3 of 4

# AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

The member or authorized representative of a member of	
1) the above named limited liability company has at least one member;	
2) the total amount of cash contributed by the member(s) is	\$ 100.00 ;
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.)  and  4) the total amount of cash and property contributed and anticipated to be contributed by member(s) is  (This total includes amounts from 2 and 3 above.)  Signature of a member or an authorized representative of a mem  (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.)	SECRETARY OF STATE SOLVISION OF CORPORATIONS 99 JUN - 2 PM 1: 32 99 JUN - 2 PM 1: 32 ber.
David G. Hackett, Authorized Representative	
Typed or printed name of signee	

Filing Fee: \$250.00 for Application and Affidavit

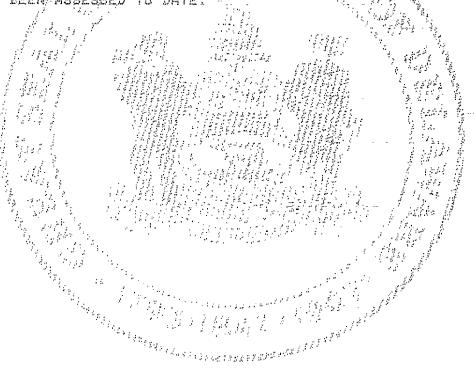
Fax Audit No.: H99000013266 4 Page 4 of 4

PAGE

#### State of Delaware Office of the Secretary of State

I, EDWARD J. FREEL. SECRETARY OF STATE OF THE STATE OF DELAWARE, DO MEREBY CERTIFY "THE THORNESTONE GROUP, LEC" IS DULY FURNED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXASTENCE, SO FAR AS THE RECORDS OF THIS

ĂNGIUAL TAXES HAVE NOT BEEN ASSESSED



Edward J. Freel, Secretary of State

**AUTHENTICATION:** 

9777374 .

DATE:

06-01-99

3049682 8300

991218019

Fax Audit No.: H99000013266 4