# Withrow, McQuade & Olsen, LLP M4900000000098/

June 21, 1999

### VIA FEDERAL EXPRESS

Registration Section Division of Corporations 409 East Gaines Street Tallahassee, Florida 32399

600002912126--0 -06/22/99--01049--021 \*\*\*\*346.25 \*\*\*\*346.25

Re: Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida

Dear Sir or Madam:

Please find enclosed the following documents necessary to authorize TSO Oak Grove, LLC a Georgia limited liability company (the "Company"), to transact business in Florida:

- 1. Application by Foreign Limited Liability Company for Authorization to Transact Business in Horieta;
- 2. Original Certificate of Existence for the Company;
- 3. Affidavit of Membership and Contributions of Foreign Limited Liability Company;
- 4. Certificate of Designation of Registered Agent/Registered Office; and
- 5. Check in the amount of \$346.25 for the filing fee for the Application and Affidavit, Designation of Registered Agent, Certificate of Status and Certified Copy.

Please process the enclosed and return to me a letter of acknowledgment as well as a certificate of status and certified copy of the application. If you have any questions, please do not hesitate to contact the undersigned.

Sincerely,

Sarah E. Ratliff

Paralegal

Enclosure

cc: Mr. Christopher D. Hardy (w/ encl.)

rak E. Kattiff

Scott C. Withrow, Esq. (w/ encl.)

Name
Availability

Document
Examinar

Updater

Updater
Varifyer

Acknowledgement

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

IN COMPLIANCE WITH SECTION 60 LIMITED LIABILITY COMPANY TO TR	8.503, FLORIDA STATUTES, THE FOLLOWING I. ANSACT BUSINESS IN THE STATE OF FLORIDA:	S SUBMITTED TO REGISTER A FOREIGN
and a 1 Gravia	TJC	T C " if not

	ANY TO TRANSACI BUSINI					
TSO Oak ( ame of foreign limited contained in the name	Grove, LLC liability company must en e at present.)	d with the wo	ords "limited compar	ny" or their abbre	viation "L.C."	if not
Georgia risdiction under the la npany is organized)	w of which foreign limited	3.	applied (FEI	for number, if appli	cable)	<del></del>
5/18/99	Organization)	5.	perpetua (Duration: Year l exist or "perpetua	imited liability co	ompany will ce	ease to
	rst transacted business in F			8.502, and 817.1	55, F.S.)	<del>-</del> : <u>-</u>
600 West	t Peachtree Str	eet, Su	ite 1850			
A+1anta	, Georgia 30308	reet address o	of principal office)		<u></u>	<del></del> , ,
	6		na member[MG]	RM] or manag	er[MGR]wh	.O
st name, title, and ill manage the fore NAME 8	business address of eacign limited liability co		ng member[MG] Florida: (attach a	RM] or manag additional page ADDRESS:	er[MGR]wh if necessary	
st name, title, and ill manage the fore NAME &	business address of eacign limited liability co ADDRESS:	ach managi ompany in TITLE:	ng member[MG] Florida: (attach a NAME &			
ist name, title, and ill manage the fore  NAME 8  Orlando  600 Wes	business address of eacign limited liability co	ach managi ompany in TITLE: MGRM  , Suite	ng member[MG] Florida: (attach a NAME &			
ist name, title, and ill manage the fore  NAME 8  Orlando  600 Wes	business address of eacign limited liability con the business address of each tree St.	ach managi ompany in TITLE: MGRM  , Suite	ng member[MG] Florida: (attach a NAME &			FILED 99 JUN 22 PH 5:
ist name, title, and ill manage the fore  NAME 8  Orlando  600 Wes	business address of eacign limited liability con the business address of each tree St.	ach managi ompany in TITLE: MGRM  , Suite	ng member[MG] Florida: (attach a NAME &			FILED 99 JUN 22 PH 5:

<sup>9.</sup> 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.)

# AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

The undersigned member or authorized representative of a member ofTSO Oak Grcertifies:	ove, LLC
1) the above named limited liability company has at least one member;	
<ul> <li>2) the total amount of cash contributed by the member(s) is</li> <li>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</li> <li>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.)</li> </ul>	\$4,190,000; \$0; \$4,190,000.
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.)  A. Boyd Simpson, Manager, Orlando TSO, LLC, M  Typed or printed name of signee	AND SECOND IN COLUMN SECOND SE

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:

TSO Oak Grove, LLC

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

Corporation Service Company	<u>. ≓∽</u> 9
(Name)	9 JUN 2 GORETA
1201 Hays Street	
Florida street address (P.O. Box NOT ACCEPTABLE)	
Tallahassee FL 32301	등 의 5 - 0 5 - 0
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.

Deleorah D. Skipper

(Signature)

Deborah D. Skipper, as agent

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 : K91580923
CONTROL NUMBER : K921294
DATE INC/AUTH/FILED: 05/18/1999

JURISDICTION : GEORGIA
PRINT DATE : 06/07/1999

FORM NUMBER : 211

WITHROW, MCQUADE & OLSEN, LLP SARAH E. RATLIFF 3379 PEACHTREE RD., NE STE. 970 ATLANTA, GA 30326

#### 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

## TSO OAK GROVE, 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.

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.



Colly Cop

Cathy Cox Secretary of State