# M 99000001387

C T CORPORATION DIDITI		
Requestor's Name 660 East Jefferson St	reet	
Address		
	1 (850)222-1092	4000029782543 -09/03/9901055016
City State Zip	Phone	-09/03/9901055016 ****285.00 ****285.00
CORPORA	TION(S) NAME	
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X-Limited Liability Com	pany	(S.Madi
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( ) Limited Partnership	() Annual Rep	ort () Other
() Reinstatement	() Reservation	() Change of R.A.
() Limited Liability Par	tnership	() Fictitious Name
() Certified Copy	() Photo Copi	es () CUS
() Call When Ready	() Call if Probl	em () After 4:30
● Walk In	( ) Will Wait	Pick Up
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Availability	9/3	PLEASE RETURN EXTRA COPT S)
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Examiner		CONNIE BRYAN
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Verifier	- h,	
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Acknowledgment	1:109	15/99
W.P. Verifier	•	

## 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:

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,	D1 M1 D				40
1.	Blue Tiger Proper ne of foreign limited liability comp	cties, LLU	eda Ulimitad aansaassu aa tha	nia alabannianiaa WT C	
SO CO	ontained in the name at present.)	pany must end with the wor	ds infined company of the	andieviation L.C.	1000
•	F				T 050
2.	Georgia	3,	Applied for		1
(Juris	Georgia sdiction under the law of which for	reign limited liability	(FEI number,	if applicable)	<del>''' ''</del> '''
comp	oany is organized)	<b>.</b>	<u>.</u>	, ,	Q 700
	0/21/00		Down a true 1		7 904
4	8/31/99	<u></u>	Perpetual		
	(Date of Organization)		(Duration: Year limited lia	bility company will c	ease to
			exist or "perpetual")		¥ 75
_	9/10/99				
6	•	vices in Florida (Con on	ctions 608.501, 608.502, and	3 017 155 F.O.V	
	(Date first transacted o	dusiness in Florida. (See sec	mons 608.501, 608.502, and	1 61 /.133, F.S.)	
7 C.		Deed NE	-		
/. <u> </u>	uite 1600, 3343 Peacht	ree wad wr			
	.1 . 04 20206				<del>.</del>
A	tlanta, GA 30326				
		(Street address of p	principal office)	•	
8. List:	name, title, and business add	lress of each managing	member[MGRM] or m	nanager[MGR]wh	0
	name, title, and business add				
	name, title, and business add manage the foreign limited li				
	manage the foreign limited li	iability company in Flo	orida: (attach additional	page if necessary	)
		iability company in Flo		page if necessary	)
	manage the foreign limited li	iability company in Flo	orida: (attach additional	page if necessary	)
	manage the foreign limited li  NAME & ADDRESS  Flynn D. Morris	iability company in Floring:  TITLE:  MGRM	orida: (attach additional	page if necessary	)
	manage the foreign limited li  NAME & ADDRESS  Flynn D. Morris  475 Blue Mounta	iability company in Floring:  TITLE:  MGRM	orida: (attach additional	page if necessary	)
	NAME & ADDRESS  Flynn D. Morris 475 Blue Mounta Beach Drive	iability company in Floring TITLE:  s. Jr. MGRM ain	orida: (attach additional	page if necessary	)
	manage the foreign limited li  NAME & ADDRESS  Flynn D. Morris  475 Blue Mounta	iability company in Floring TITLE:  s. Jr. MGRM ain	orida: (attach additional	page if necessary	)
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	NAME & ADDRESS  Flynn D. Morris 475 Blue Mounta Beach Drive	iability company in Floring TITLE:  s. Jr. MGRM ain	orida: (attach additional	page if necessary	)
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	NAME & ADDRESS  Flynn D. Morris 475 Blue Mounta Beach Drive	iability company in Floring TITLE:  s. Jr. MGRM ain	orida: (attach additional	page if necessary	)
	NAME & ADDRESS  Flynn D. Morris 475 Blue Mounta Beach Drive	iability company in Floring TITLE:  s. Jr. MGRM ain	orida: (attach additional	page if necessary	)
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	NAME & ADDRESS  Flynn D. Morris 475 Blue Mounta Beach Drive	iability company in Floring TITLE:  s. Jr. MGRM ain	orida: (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 is in a foreign language, a translation of the certificate under eath 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	99558 23
1) the above named limited liability company has at least one member;	3
2) the total amount of cash contributed by the member(s) is	\$ <u>100,000</u> ;
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.)	\$;
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.)	\$ <u>100,000</u> .
Signature of a member or an authorized representative of a meml (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.)	ber.
John G. Morris  Typed or printed name of signee	

Filing Fee: \$250.00 for Application and Affidavit

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

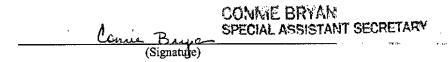
PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, LITTLE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

		Division December IIC	
I.	The name of the	Limited Liability Company is:	

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

C I Corporation S	ysten		
	(Name)	•	
1200 South Pine I	sland Road	-	
Florida street addr	ess (P.O. Box NOT	ACCEPTABLE)	
Plantation _	FL -	33324	
	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.



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 : K92440049

CONTROL NUMBER : K935779

DATE INC/AUTH/FILED: 08/31/1999

JURISDICTION : GEORGIA

PRINT DATE : 09/01/1999

FORM NUMBER : 211

MORRIS, MANNING & MARTIN
JUDITH A. NAVE
3343 PEACHTREE RD, NE, STE 1600
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

## BLUE TIGER PROPERTIES 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.



Cathy Cox Secretary of State