# m0000000834

(Re	equestor's Name)	_
		•
(Ad	ldress)	
(Ad	ldress)	
	·	
(Cit	ty/State/Zip/Phone	a #f)
(Cil	.y/Otate/Zip/i Hone	<i>□</i>
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
•	,	
Certified Copies	Certificates	e of Status
Certified Copies	_ Certificates	S OI Status
Special Instructions to	Filing Officer:	
	· · · · · · · · · · · · · · · · · · ·	<del> </del>

Office Use Only



100074605111

05/16/06--01050--012 \*\*160.00

SECRETARY OF STATE
DIVISION OF THE PART ATTOMS



#### **COVER LETTER**

Registration Section Division of Corporations

TO:

SUBJECT: PLACID INVESTM	ENT COMPANY, LLC,	
(Name of Limit	ted Liability Company) AN A BAMA UM 1720	
	company for Authorization to Transact Business in bmitted to register the above referenced foreign limited	
Please return all correspondence concerning this ma	atter to the following:	
S. Scott	CRITZEL	
(Nar	ne of Person)	
ATTORNEY (Fire	AT LAW n/Company)	
10343 EAST County Hibshway 30-A UNIT #10:		
PANAMA CITY BEACH FL 32413 (City/State and Zip Code)		
For further information concerning this matter, please call:  Scott Cross at 850 685 -4285		
Scott Critical (Name of Person)	(Area Code & Daytime Telephone Number) (Area Code & Daytime Telephone Number)	
MAILING ADDRESS:	STREET ADDRESS:	
Division of Corporations P.O. Box 6327	Division of Corporations  Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a check for the following amount:  \$\Bigsim \\$125.00 \text{ Filing Fee} \Bigsim \\$130.00 \text{ Filing Fee & Certificate of \$\Section{2}{3}\$	\$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status & Certified Copy	

#### 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: (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) (Duration: Year limited liability company will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration.) 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction 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.) 11. Nature of business or purposes to be conducted or promoted in Florida:

Typed or printed name of signee
S. Scott Critzer, Attorney for Placid Investment Company, LLC

908,408(3) F.S., the execution of this document constitutes

les of perjury hat the facts stated herein are true.)

Signature of a member or an authorized representative of a member.

(In accordance

### 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:

#### PLACID INVESTMENT COMPANY, LLC

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

5. SCOTT CRITCUR, ATTOMNOY AT LAW
(Name)

418 WHITE HERON DRIVE
Florida Street Address (P.O. Box NOT ACCEPTABLE)

SANTA ROSA BEACH FL 32459
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 as provided for in Chapter 608, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

OBMAY 16 PH 3. 2.

## STATE OF ALABAMA

I, Nancy L. Worley, Secretary of State of the State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the domestic corporate records on file in this office disclose that Placid Investment Company, L.L.C. organized in the office of the Judge of Probate of Jefferson County on December 28, 1994. I further certify that the records do not disclose that said Placid Investment Company, L.L.C. has been dissolved.

2006 MAY 16 PM 3: 31



In Testimony Whereof, I have hereunto set-my-hand and affixed the Great Seal of the State, at the Capitol, in the City of Montgomery, on this day.

May 10, 2006

Date

Many & Sarley

Nancy L. Worley

Secretary of State