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(Requestor's Name)	
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Certified Copies Certificates of Status	
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SECRETARY OF STATE. DIVISION OF CORPORATION



T. HAMPTON
MAY 8 7 2011
EXAMINER

COVER LETTER

SUBJECT: LFG Capital Partner	Name of Limited Liability Company
	Liability Company for Authorization to Transact Business in Florida," Certificate of
	he above referenced foreign limited liability company to transact business in Florida
Please return all correspondence concerning this	s matter to the following:
Kathleen Lauro	
Math. July 10	Name of Person
Lancer Insurance Com	pany
	Firm/Company
370 West Park Ave., I	PO Box 9004
	Address
Long Beach, NY 1156	1-9004
	City/State and Zip Code
klauro@lancer-ins.c	com
	s: (to be used for future annual report notification)
For further information concerning this matter, p	elease call:
Kathleen Lauro	_{at (} 516 <u>431-4441</u>
Name of Person	Area Code & Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section	STREET ADDRESS: Division of Corporations Registration Section
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount \$\sqrt{\sq}}}}}}}}} \sqrt{\sq}}}}}}}}}}}}} \signtimes\sqnt{\sqrt{\sintikta}}}}}}}}}} \sqrt{\sqrt{\sint{\sint{\sint{\sint{\sint{\si	Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

11 MAY 26 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

April 6, 2011

KATHLEEN LAURO LANCER INSURANCE COMPANY P O BOX 9004 LONG BEACH, NY 11561-9004

SUBJECT: LFG CAPITAL PARTNERS LLC

Ref. Number: W11000019405

We have received your document for LFG CAPITAL PARTNERS LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper, that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton Regulatory Specialist II

Letter Number: 411A00008343



May 23, 2011

Ms. Tammy Hampton Regulatory Specialist II Florida Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: LFG Capital Partners LLC - Ref. No: W11000019405

Dear Tammy:

In response to your April 16th letter, copy attached, enclosed is a Certificate of Good Standing. Please process the Authorization to Transact Business.

Kindly direct all correspondence and inquiries regarding this matter to my attention.

Sincerely,

Kathleen Lauro

Licensing Manager

Ext. 3352

klauro@lancer-ins.com

Enc.

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 RUSINESS IN THE STATE OF FLORIDA:

LEG Conital Portners LLC	
LFG Capital Partners LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company)	y," "L.L.C.," or "LLC.")
	•
name unavailable, enter alternate name adopted for the purpose of transacting business in Finsent of the managers or managing members adopting the alternate name. The alternate name impany," "L.L.C," "LLC.")	orida and attach a copy of the written e must include "Limited Liability
Delaware 3, 27-4790183	
(Jurisdiction under the law of which foreign limited liability (FEI number, company is organized)	if applicable)
2/3/11 5. Perpetual	
(Date of Organization) (Duration: Year limited liexist or "perpetual")	ability company will cease to
Business will be transacted as soon as entity is qualified	- X
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	13 HA
	S PAT
370 West Park Ave., Long Beach, NY 11561	o cor
(Street Address of Principal Office)	POS
If limited liability company is a manager-managed company, check here 🗸	STATE ORATIONS
The name and usual business addresses of the managing members or managing	ers are as follows:
David P. Delaney, Jr., 804 Spinnakers Reach Dr., Ponte Vedra Be	
David 1. Delaney, St., 604 Ophiliakers Reacti Dr., 1 Onte Vedra De	3 8011, 1 L 32002
. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certifical is a comparable of the certificate under oath of the translator must be submitted.)	
. Nature of business or purposes to be conducted or promoted in Florida: Ar	y and all business
for which a limited liability company may be organized.	<u> </u>
Shuly B. Ortes	
Signature of a member or an authorized representative of	a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes	
penalties of perjury that the facts stated herein are true. I am aware that any false interest document to the Department of State constitutes a third degree felony as provi	
Shirley B. Ortego, Vice Resident	
Typed or printed name of signee	

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:
LFG Capital Patners LLC	<u> </u>
If unavailable, the alternate to be used in	in the state of Florida is:
2. The name and the Florida street add	ress of the registered agent and office are:
NRAI Services, Inc.	
	(Name)
2731 Executive Pa	ark Dr., Suite 4
Florida Street	t Address (P.O. Box NOT ACCEPTABLE)
Weston	_{FL} 33331
· · · · · · · · · · · · · · · · · · ·	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) Suranne T. CreyAN, Asst, Sec

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "LFG CAPITAL PARTNERS LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE NINTH DAY OF MAY, A.D. 2011.

4935691 8300

110430832

Jeffrey W. Bullock, Secretary of St AUTHENTICATION: 8747514

DATE: 05-09-11

You may verify this certificate online at corp.delaware.gov/authver.shtml