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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

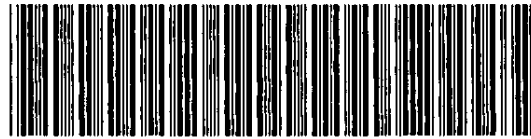
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
12 MAR -6 AM 11:45
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

B. BOSTICK
MAR _ 7 2012
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Centurion Land Transfer LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Rose Marie Pietrafesa
Name of Person

Pietrafesa LTD
Firm/Company

415 Egg Harbor Road, Suite 15-11
Address

Sewell, NJ 08080
City/State and Zip Code

PietrafesaLTD@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rose Marie Pietrafesa at (888) 9915554
Name of Person Area Code & Daytime Telephone Number

MAILING ADDRESS:
Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

12 MAY - 6 AM 11:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
FILED

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy
- \$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:

1. Centurion Land Transfer LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")

2. Pennsylvania 3. 45-4476287
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. February 21, 2012 5. "perpetual"
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")

6. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. 3915 Jupiter Park Drive, Suite 700
Jupiter, Florida 33458
(Street Address of Principal Office)

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:
Rose Marie Pietrafesa 415 Egg Harbor Road, Suite 15-11 Sewell, NJ 08080

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: Title Insurance Services

Rose Marie Pietrafesa
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 an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Rose Marie Pietrafesa
Typed or printed name of signee

STATE OF FLORIDA
TALLAHASSEE
12 MAR -6 11:11:45
SECRET

**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:

Centurion Land Transfer LLC

If unavailable, the alternate to be used in the state of Florida is:

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

Vincent Pietrafesa

(Name)

3915 Jupiter Park Drive

Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Jupiter, Florida 33458

FL

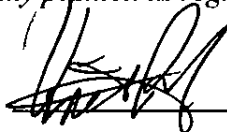
City/State/Zip

STATE
OFFICE
TALLAHASSEE, FLORIDA

12 MAR -6 AM 11:45

4711 1917

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)

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF STATE

MARCH 2, 2012

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

Centurion Land Transfer, LLC

is duly organized as a Pennsylvania Limited Liability Company under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT, This Subsistence Certificate shall not imply that all fees, taxes, and penalties owed to the Commonwealth of Pennsylvania are paid.

FILED
12 MAR -6 AM 11:45
STATE DEPT. OF STATE
HALL, HARRISBURG, PENNSYLVANIA



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Carol Aichele

Secretary of the Commonwealth

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

MARCH 2, 2012

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

Centurion Land Transfer, LLC

I, Carol Aichele, Secretary of the Commonwealth of Pennsylvania

do hereby certify that the foregoing and annexed is a true and correct
copy of

Certificate of Organization filed on February 21, 2012

which appear of record in this department.

FILED
12 MAR -6 2011:45
TALLAHASSEE, FLORIDA
SECRETARY OF STATE



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

A handwritten signature in cursive script that reads "Carol Aichele".

Secretary of the Commonwealth