

M13000002460

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

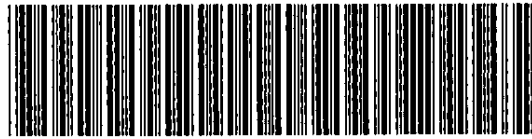
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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13 APR 16 PM 4: 10

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TALLAHASSEE FLORIDA

2013 APR 16 AM 10: 42

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APR 18 2013

D. BRUCE

M13-22407

603527



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 17, 2013

**RESUBMIT**

Please give original  
submission date as file date.

CSC  
SUSIE KNIGHT

SUBJECT: PHOENIX MANAGEMENT SERVICES LLC / PHOENIX  
MANAGEMENT SERVICES LLC OF DELAWARE  
Ref. Number: W13000022407

We have received your document for PHOENIX MANAGEMENT SERVICES  
LLC / PHOENIX MANAGEMENT SERVICES LLC OF DELAWARE and the  
authorization to debit your account in the amount of \$763.75. However, the  
document has not been filed and is being returned for the following:

The name of a limited liability company must end with the words "Limited Liability  
Company," the abbreviation "L.L.C.," or the designation "LLC." The word  
"Limited" may be abbreviated as "Ltd." and the word "Company" may be  
abbreviated as "Co." The following suffixes are no longer acceptable: "Limited  
Company," "L.C.," and "LC." Please amend your document accordingly.

Please return your document, along with 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) 245-6051.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 313A0000915

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CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195
REFERENCE : 603527 7378078
AUTHORIZATION : [Signature]
COST LIMIT : \$ 763.75

ORDER DATE : April 9, 2013
ORDER TIME : 2:56 PM
ORDER NO. : 603527-005
CUSTOMER NO: 7378078

FOREIGN FILINGS

NAME: PHOENIX MANAGEMENT SERVICES LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 52956

EXAMINER: \_\_\_\_\_

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TALLAHASSEE FLORIDA

CR2E027 (9/10)

**COVER LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: Phoenix Management Services 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:

Dianne Lomonaco  
Name of Person  
Phoenix Management Services, LLC  
Firm/Company  
110 Commons Court  
Address  
Chadds Ford PA 19317-9716  
City/State and Zip Code  
dmonaco@phoenixmanagement.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dianne Lomonaco at 484 841-6814  
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

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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  
TRANSACTION BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. Phoenix Management Services, LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

Phoenix Management Services of Delaware, 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. Delaware 3. 36-4709725  
(Jurisdiction under the law of which foreign limited liability company is organized) (FBI number, if applicable)

4. 7/20/2011 5. PERPETUAL  
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")

6. 4/2/2012  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. 401 East Las Olas Blvd, Suite 1400  
Fort Lauderdale FL 33301  
(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:  
Michael Jacoby, President 110 Commons Court, Chadds Ford, PA 19317-9716

Brian Gleason, Sec/Treasurer 110 Commons Court, Chadds Ford PA 19317

Michael McCawley, VP 110 Commons Court, Chadds Ford PA 19317

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: Turnaround, crisis and interim management services

Michael E. Jacoby  
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.)

Michael E Jacoby  
Typed or printed name of signee

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**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:

Phoenix Management Services, LLC

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

Phoenix Management Services of Delaware, LLC

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

Vince Colistra

(Name)

401 East Las Olas Blvd, Suite 1400

Florida Street Address (P.O. Box NOT ACCBPTABLE)

Fort Lauderdale

FL

33301

City/State/Zip

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*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.*

Vince Colistra

By:

  
(Signature)

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

**WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA**

We, the undersigned, do hereby certify that we are the Managers and/or Managing Members of Phoenix Management Services, LLC  
(Name of Limited Liability Company)

a limited liability company duly organized and existing under the laws of Delaware  
(State or Country of Organization)

Because the name of this foreign limited liability company does not satisfy the requirements of the s. 608.406, F.S., the limited liability company hereby adopts the following name to transact business in the state of Florida:

Phoenix Management Services of Delaware, LLC  
(Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability Company, L.L.C., or LLC.)

Date: 4/9/13

Signature(s) of Manager(s) and/or Managing Member(s):

*Michael Jacoby*  
*Michael McCauley*  
*Brian Gleason*  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

MICHAEL JACOBY  
MICHAEL MCCAULEY  
BRIAN GLEASON  
\_\_\_\_\_  
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\_\_\_\_\_  
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# Delaware

PAGE 1

*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PHOENIX MANAGEMENT SERVICES, 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 APRIL, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PHOENIX MANAGEMENT SERVICES, LLC" WAS FORMED ON THE TWENTY-SECOND DAY OF JULY, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

5015136 8300

130412847



You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 0343068

DATE: 04-09-13