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(((H13000275155 3)))



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To: Division of Corporations Fax Number : (850)617-6383 From: Account Name : ALLSTATE CORPORATE SERVICES CORP Account Number : I20040000031 Phone : (800) 906-9220 Fax Number : (800)906-9880

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email Address:

#### Foreign Limited Liability Company Aacis Management Services, LLC

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December 17, 2013

#### FLORIDA DEPARTMENT OF STATE

ALLSTATE CORPORATE SERVICES CORP Division of Corporations

SUBJECT: AACIS MANAGEMENT SERVICES, LLC

REF: W13000068751

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The jurisdiction under the laws of which the entity is incorporated or organized must be included in the document.

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.

Agnes Lunt Regulatory Specialist II FAX Aud. #: E13000275155 Letter Number: 413A00028614

## H130002751553

# 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. Aacis Management Services, LLC		
(Name of Foreign Lin	mited Liability Company)	<del></del>
2. NEW JERSEY STATE	3. N/A	
(Jurisdiction under the law of which foreign limited liab company is organized)	ibility (FEI number, if applicable)	<del></del>
4. 10/07/2010	5. PERPETUAL	
(Date of Organization)	(Duration: Year limited liability company will co exist or "perpetual")	ase to
	exist or perpendictly	2013
6. UPON REGISTRATION	The First Control of the State	
(See sections 608.501 & 608.50	ss in Florida, if prior to registration.) 502 F.S. to determine penalty liability)	Ö
7. c/o Registered Agent Solutions, Inc.		
155 Office Plaza Drive, Suite A, Tallahassee, FL 3	Address of Principal Office)	****
(anset Vi	radiess of Filacipal Other)	රා ආ
8. If limited liability company is a manager-man	naged company, check here	<del>-</del>
	e managing members or managers are as follows: venue, Point Pleasant, NJ 08742	
the jurisdiction under the law of which it is organized. (A photrar slation of the certificate under onth of the translator must be seen to be conducted to the seen that the seen to be conducted to the seen to be conducted to the seen to be seen to be conducted to the seen to be seen t	cted or promoted in Florida:  an authorized representative of a member.	
(In accordance with section 608.40 an affirmation under the negatives	108(3), F.S., the execution of this document constitutes as of perjury that the facts stated herein are true.)	
	HORIZED REPRESENTATIVE	

Typed or printed name of signee

## H13000 275 1553

## 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.

of the registered agent and office are	e:
SOLUTIONS, INC.	2) Es
(Name)	3
IVE, SUITE A	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	
	OLUTIONS, INC. (Name)  VE, SUITE A

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.

STEVEN WEISS, REGISTERED AGENT

# STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

#### AACIS MANAGEMENT SERVICES, LLC

0600365175

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on October 7, 2010.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

Anna Verde 2518 Woodbine Avenue Toms River, NJ 08755



Certification# 130533737

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 16th day of December, 2013



Androw P Sidamon-Eristoff
State Treasurer

Verify this certificate at https://www1.state.nj.us/TYTR\_StandingCert/JSP/Verify\_Cert.jsp