

MIS000007984

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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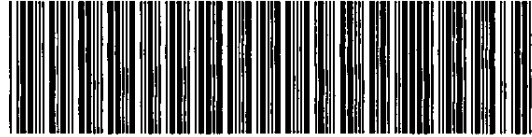
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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OCT 07 2015

S. MASON

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** CDR BRIDGE SYSTEMS, 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:

KATRINA KERR

Name of Person

CDR BRIDGE SYSTEMS, LLC

Firm/Company

8669 NW 36 STREET, SUITE 340

Address

MIAMI, FL 33166

City/State and Zip Code

katrina.kerr@cdrmaguire.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KATRINA KERR

Name of Contact Person

786 at (        )

Area Code

259-6373

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

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 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY  
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. CDR BRIDGE SYSTEMS, 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. The alternate name must include "Limited  
Liability Company," "L.L.C.," or "LLC.")

2. PENNSYLVANIA 3. 46-4095297  
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)  
company is organized)

4. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 8669 NW 36 STREET, SUITE 340

MIAMI, FL 33166

(Street Address of Principal Office)

6. SAME AS ABOVE

(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: CARLOS A. DUART

Office Address: 8669 NW 36 STREET, SUITE 340

MIAMI, Florida 33166

(City)

(Zip code)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**Registered agent's acceptance:**

*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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and  
accept the obligations of my position as registered agent.*



(Registered agent's signature)

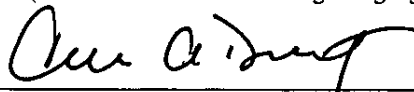
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

CARLOS A. DUART, CEO 8669 NW 36 ST., STE 340, MIAMI, FL 33166

THOMAS STOCKHAUSEN, PRESIDENT 503 MARTINDALE ST., STE 610, PENNSYLVANIA, PA 15212

ANDRE A. DUART, COO 8669 NW 36 ST., STE 340, MIAMI, FL 33166

9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath  
of the translator must be submitted)



Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

CARLOS A. DUART

Typed or printed name of signee

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF STATE

09/26/2015

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

CDR Bridge Systems, LLC

is duly registered 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.



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

*Pedro A. Contes*  
Secretary of the commonwealth

Certification Number: TSC150924100450-1

Verify this certificate online at <http://www.corporations.pa.gov/orders/verify.aspx>