

M1800008611

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

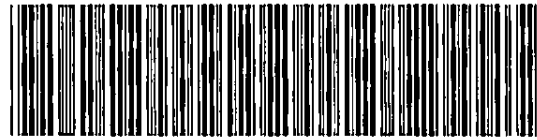
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

M18-80898

Office Use Only



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09/04/18--01004--001 **100.00

09/20/18--01003--001 **25.00

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2018 SEP 19 PM 2:50
SECRETARY OF STATE
TALLAHASSEE FLORIDA

D. BRUCE
SEP 19 2018



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 10, 2018

ELIZABETH BARR
1501 TILTON ROAD, 2ND FLOOR
NORTHFIELD, NJ 08225

SUBJECT: ATLANTIC LAND TRANSFER SERVICES, LLC
Ref. Number: W18000080878

We have received your document for ATLANTIC LAND TRANSFER SERVICES, LLC and your check(s) totaling \$100.00. However, the document has not been filed and is being retained in this office for the following:

The fees to file a Florida Limited Liability Company or register a Foreign Limited Liability Company are as follows: \$100 filing fee; and \$25 registered agent designation fee. Please include an additional \$30 for each certified copy requested (optional) and \$5.00 for each certificate of status requested (optional).

There is a balance due of \$25.00.

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
Corporate Records Supervisor

Letter Number: 718A00018769

2018 SEP 19 PM 2:20
STATE OF FLORIDA
DIVISION OF CORPORATIONS

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Atlantic Land Transfer 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:

Elizabeth Barr
Name of Person
Atlantic Land Transfer Services, LLC
Firm/Company
1501 Tilton Road, 2nd Floor
Address
Northfield NJ 08225
City/State and Zip Code
betsybarr@tcjonline.com
E-mail address: (to be used for future annual report notification)

RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2018 SEP 19 PM 2:58

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For further information concerning this matter, please call:

Elizabeth Barr at (609) 391-9400
Name of Contact 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

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. Atlantic Land Transfer Services, 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. New Jersey (Jurisdiction under the law of which foreign limited liability company is organized) 3. 47-3721870 (FEI number, if applicable)

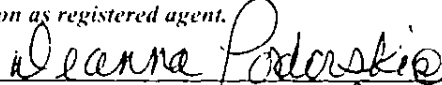
4. _____
(Date first transacted business in Florida, if prior to registration.)
 (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 1501 Tilton Road, 2nd Floor (Street Address of Principal Office) Northfield NJ 08225
 6. 1501 Tilton Road, 2nd Floor (Mailing Address) Northfield NJ 08225

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
 Name: Deanna Podgorski
 Office Address: 227 Oakpoint Circle
Davenport Florida 33837
(City) (Zip code)

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 2018 SEP 19 PM 2:28
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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) Deanna Podgorski

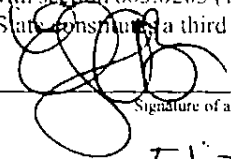
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>EVP</u>	<u>Elizabeth Barr</u> <u>1501 Tilton Rd 2nd FL</u> <u>Northfield NJ 08225</u>	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(Use attachments if necessary)

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)

10. 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.



Signature of an authorized person
Elizabeth Barr
Typed or printed name of signee

STATE OF NEW JERSEY
DEPARTMENT OF THE TREASURY
DIVISION OF REVENUE AND ENTERPRISE SERVICES
LONG FORM STANDING WITH OFFICERS AND DIRECTORS

ATLANTIC LAND TRANSFER SERVICES LIMITED LIABILITY COMPANY
0400669541

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 June 27, 2014.

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.

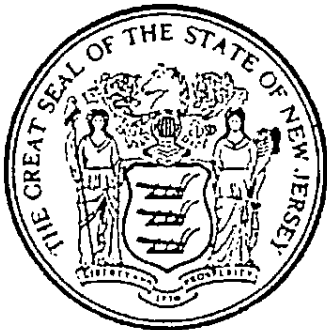
I further certify that the registered agent and office are:

JOHN L. LINNINGTON III
1501 TILTON ROAD, 2ND FLOOR
SUITE 201
NORTHFIELD, NJ 08225

I further certify that as of the date of this certificate, the following were listed as officers/directors of this business on the last Annual Report filed in this office on April 25, 2018.

OTHER

DR. ARNOLD BERMAN
809 MORRIS AVENUE
BRYN MAWR, PA 19010



IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed
my Official Seal at Trenton, this
24th day of August, 2018

Elizabeth Maher Muoio
State Treasurer

Number : 6090762740

View online at

standingCert/JSP/Verifi_Cert.jsp