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Carl A. Cascio

OF COUNSEL

Gary S. Gaffney

BOARD CERTIFIED REAL ESTATE ATTORNEY

FIRST FINANCIAL PLAZA
639 EAST OCEAN AVENUE, SUITE 207
BOYNTON BEACH, FLORIDA 33435
(561) 736-7743
FAX (561) 737-9775

August 21, 2001

Division of Corporations
Registration Section
409 E. Gaines Street
Tallahassee, FL 32399

600004552186--5
-08/23/01--01046--001
****160.00 ****160.00

RE: FOUR CORNERS OF LIFE, ENT., LLC

Dear Sir or Madame:

Enclosed please find an original and one (1) copy of the Application By Foreign Limited Liability Company For Authorization To Transact Business In Florida. Also enclosed is our check in the amount of \$160.00 representing the application filing fee, Designation of Registered Agent filing fee, certified copy fee and Certificate of Status fee.

Thank you for your attention to this matter. If you have any questions, please do not hesitate to contact my office.

Very truly yours,

Carl A. Cascio

CAC/gk
Enclosure

cc: Ms. Nancy G. Cullen (w/encs.)

FILED
01 OCT -5 PM 1:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

M01-2268
OK



LAW OFFICES

Carl A. Cascio, P.A.

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OF COUNSEL

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FIRST FINANCIAL PLAZA
639 EAST OCEAN AVENUE, SUITE 207
BOYNTON BEACH, FLORIDA 33435
(561) 736-7743
FAX (561) 737-9775

October 2, 2001

Division of Corporations
Registration Section
409 E. Gaines Street
Tallahassee, FL 32399

Attn.: Tammi Cline
Document Specialist

FILED
01 OCT -5 PM 1:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Re: FOUR CORNERS OF LIFE, ENT., LLC
Reference Number: W01000019980

Dear Ms. Cline:

Pursuant to your August 28, 2001 correspondence (copy enclosed), enclosed please find the Certificate of Good Standing with regard to the captioned matter.

Thank you for your prompt attention to this matter. If you have questions, please do not hesitate to contact my office.

Very truly yours,

Carl A. Cascio

CAC/gk
Enclosure

cc: Ms. Nancy G. Cullen (w/encs.)



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

August 28, 2001

CARL CASCIO
639 EAST OCEAN AVENUE, SUITE 207
BOYNTON BEACH, FL 33435

SUBJECT: FOUR CORNERS OF LIFE, ENT., LLC
Ref. Number: W01000019980

We have received your document for FOUR CORNERS OF LIFE, ENT., LLC and your check(s) totaling \$160.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6020.

Tammi Cline
Document Specialist

Letter Number: 001A00048923

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 OCT -5 PM 1:09

FILED

**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. FOUR CORNERS OF LIFE, ENT., LLC
(Name of foreign limited liability company)
2. New Jersey
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 22-3614275
(FEI number, if applicable)
4. October 16, 1988
(Date of Organization)
5. October 1, 2028
(Duration: Year limited liability company will cease to exist or "perpetual")
6. No business has been transacted as of the date of this filing.
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 11211 So. Military Trail, #5012
Boynton Beach, FL 33436
(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:

Nancy G. Cullen

14545 J Military Trail, #118

Delray Beach, FL 33484

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01 OCT -5 PM 1:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: motivational instructions

Nancy G. Cullen
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.)
Nancy G. Cullen
Typed or printed name of signee

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:

FOUR CORNERS OF LIFE, ENT., LLC

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

Nancy G. Cullen

14545 J Military Trail (Name)

#118

Delray Beach, Florida 33484

Florida street address (P.O. Box **NOT** ACCEPTABLE)

FL

City/State/Zip

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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, F.S..



(Signature)

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

STATE OF NEW JERSEY
DEPARTMENT OF TREASURY
SHORT FORM STANDING

FOUR CORNERS OF LIFE, ENT., LLC

*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 16, 1998.*

*As of the date of this certificate, said business
continues as an active business in the State of New
Jersey. Annual Reports are outstanding for the
following year(s):*

2000

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

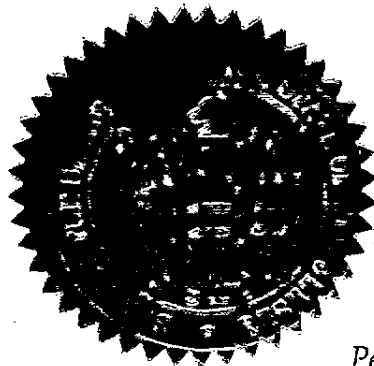
*Nancy Cullen
42 West Park Avenue
Park Ridge, NJ 07656*

Continued on next page . . .

STATE OF NEW JERSEY
DEPARTMENT OF TREASURY
SHORT FORM STANDING

FOUR CORNERS OF LIFE, ENT., LLC

IN TESTIMONY WHEREOF, I have
hereunto set my hand and
affixed my Official Seal
at Trenton, this
26th day of September, 2001



A handwritten signature in dark ink, appearing to read "Peter R. Lawrance".

Peter R Lawrance
Acting State Treasurer