# MOQUELACIO (1977) Attorney at Law 35 East Pinehurst Boulevard

Eustis, Florida 32726

Telephone (352) 589-1919

Telecopier (352) 589-0032

M.H.

February 5, 2002

Florida Department of State Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314 480

200004889662--3 -02/07/02--01022--008 \*\*\*\*285.00 \*\*\*\*125.00

1002-4104

RE: Reliance Asset Management, LLC – Our File No. 01-1220

Dear Sir or Madam:

In reference to the above, enclosed herewith please find the following to be filed with the Florida Department of State: (1) "Application By Foreign Limited Liability Company for Authorization to Transact Business in Florida" with an original "Certificate of Existence" from State of Delaware attached thereto, (2) "Affidavit of Membership and Contributions of Foreign Limited Liability Company" and (3) "Certificate of Designation of Registered Agent/Registered Office". Also, enclosed herewith please find our trust check in the amount of \$285.00 for the filing fees.

If you should have any questions or comments, please do not hesitate to contact me.

Sincerely,

Tiffany S. Lee

Secretary to Clayton H. Blanchard, Jr.

**Enclosures** 

FILED

02 APR 30 AM 10: 34

SECRETARY OF STATE

#### CLAYTON H. BLANCHARD, JR., P.A.

35 East Pinehurst Blvd. Eustis, Florida 32726

TELEPHONE (352) 589-1919 FACSIMILE (352) 589-0032

April 23, 2002

Florida Department of State Registration Section Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314

> RE: Reliance Asset Management, LLC Reference No. W02000004104

Dear Sir or Madam:

In regard to the above-referenced limited liability company, enclosed herewith please find the appropriate forms to be filed with your office for authorization to do business in the State of Florida.

This application was originally sent to your office on or about February 7, 2002, along with a check in the amount of \$285.00. I am hereby requesting a refund of the overpayment in the amount of \$125.00. Please forward the check payable to Clayton H. Blanchard, Jr. to the above address.

If you should have any questions or comments, please feel free to call.

Sincerely.

Tiffany S. Lee

Secretary to Clayton H. Blanchard, Jr.

**Enclosures** 



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

February 12, 2002

TIFFANY S. LEE CLAYTON H. BLANCHARD, JR. 35 EAST PINEHURST BOULEVARD EUSTIS, FL 32726

SUBJECT: RELIANCE ASSET MANAGEMENT, LLC

Ref. Number: W02000004104

We have received your document for RELIANCE ASSET MANAGEMENT, LLC and your check(s) totaling \$285.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must complete the attached forms to register a foreign LLC, the forms submitted are for a corporation, also, you have overpaid by \$125.00, please request a refund in your cover letter.,

Effective October 1, 1999, Chapter 608, Florida Statutes, does not require or permit the filing of an "Affidavit of Membership and Capital Contributions." Therefore, the enclosed document has not been filed and is being returned to you.

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) 245-6967.

Letter Number: 802A00008537

Michelle Hodges Document Specialist

#### 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:

Reliance	a Asset	Managem	ent, LLC						
				ı limi	ted liability company	)			
Delaware	∋			3	91-21305	518			
Jurisdiction under ompany is organi		hich foreign	limited liability	٠	( FEI no	imber, if applic	able)		<del></del>
May 22,	2001 ate of Organiz	ration)		5	2031 (Duration: Year limexist or "perpetual"	ited liability con	mpany will c	ease to	<u> </u>
August 1		a ata d bassina	:- Flanido /C			00 1 017 120	: 50)		
			is in Florida. (5	ee sec	ctions 608.501, 608.5	02, and 817.153	), F.S.)		
1100 14t	th Stree	<u>t                                    </u>						<u> </u>	
Orange C	City, Fl	orida 3:	2763		-	•			
		X	(Street addre	ss of p	principal office)		TAL SE	02	_
If limited liabi	ility compa	ny is a man	ager-manage	d co	mpany, check her	e X	CKE IA LAHA!	APR	13
The name and	usual busi	ness addres	ses of the ma	magi	ng members or m	anagers are a	s follows:	30	
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							D.E.	34	
			-						<del></del>
<del></del>	<del></del>		<del>*************************************</del>						_
urisdiction under	rthe law of wh	nich it is organ	nized. (A photoc	opy is	ys old, duly authentica s not acceptable. If the				
slation of the cert	iticate under o	ath of the tran	islator must be si	ubmit	ted.)				
Nature of bus	siness or pu	rposes to b	e conducted	or pr	omoted in Florida	a:			_
(	CONS	TRUCT	TLON						
					rized representati		ber.	hen	<b></b> '
	(In acco	rdance with se mation under t	ction 608.408(3).	, F.S., criury	the execution of this do	ocument constitut	es		
			ICHARD LE						
			yped or printe						

### 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 Limit	ted Liability Company is:
Reliance Asset	Management, LLC
2. The name and the Flor	rida street address of the registered agent and office are:
	Richard Leon Arthur
<del> </del>	(Name)
	1100 14th Street
	Florida street address (P.O. Box NOT ACCEPTABLE)
	Orange City, FL 32763  City/State/Zip
-	City/State/Zip
liability company at the pregistered agent and agrestatutes relating to the pre	egistered agent and to accept service of process for the above stated limited place designated in this certificate, I hereby accept the appointment as see to act in this capacity. I further agree to comply with the provisions of all complete performance of my duties, and I am familiar with and my position as registered agent as provided for in Chapter 608, F.S  Manager M. Manager M. Luber gnature)

\$ 100.00 Filing Fee for Application

\$ 25.00

\$ 30.00

5.00

Designation of Registered Agent

Certificate of Status (optional)

**Certified Copy (optional)** 

PAGE 1 \*

# Delaware

#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "RELIANCE ASSET MANAGEMENT, 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 SEVENTH DAY OF JANUARY, A.D. 2002.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RELIANCE ASSET MANAGEMENT, LLC" WAS FORMED ON THE TWENTY-SECOND DAY OF MAY, A.D. 2001.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.



Warriet Smith Windson
Harriet Smith Windson, Secretary of State

AUTHENTICATION: 1543001

DATE: 01-07-02

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