# 

(R	equestor	s Name)	
(A	ddress)	<del></del>	<u> </u>
(A	ddress)		<del></del>
(C	ity/State/	Zip/Phone #	f)
PICK-UP	<u></u>	NAIT	MAIL
(B	usiness É	ntity Name	)
<u>(D</u>	ocument	Number)	<del></del>
Certified Copies	_ c	ertificates o	f Status
Special Instructions to	Filing Of	ficer:	
Plam <b>e</b> Availabilit <b>y</b>			
Document Examiner	DCC		
Vodater	D6ffic	Use Only	
Updater Verifyer	DCC		
Acknowledgement	DCC		_
W. P. Verifyer	Doral		



500018012865

(16<del>/25/03 - 0**1260 - 2**02 >\*\*\*235.8</del>0

06/25/03--01003--002 \*\*155.00

O3 JUN 25 AN 8-00 SECRETARY OF STATE TALLARY VEEL FLORIDA

#### SPOTTSWOOD, SPOTTSWOOD AND SPOTTSWOOD ATTORNEYS AND COUNSELORS AT LAW 500 FLEMING STREET POST OFFICE BOX 1900 KEY WEST, FLORIDA 33041-1900

JOHN M. SPOTTSWOOD, JR. WILLIAM B. SPOTT\$WOOD ERICAN, HUGHES

TELEPHONE 305-294-9556 305-292-1982

OF COUNSEL: JOHN M. SPOTTSWOOD (1920-1975) ROBERT A. SPOTTSWOOD

VIA FEDERAL EXPRESS

June 17, 2003

DEPARTMENT OF STATE Division of Corporations 409 E. Gaines Street Tallahassee FL 32399

Application by Foreign Limited Liability Company for Authorization to Transact Business in the State of Florida - Sunset Ventures, LLC

Dear Sir or Madam:

Enclosed is Application for Sunset Ventures, LLC to do business in the State of Florida and our firm's check in the amount of \$155.00 which represents filing fee, Designation of Registered Agent and Certified Copy. Also enclosed is Certificate of Status from the State of Pennsylvania. Please forward a copy of filed Articles to our office for our records.

If you have any questions please do not hesitate to contact our office.

Sincerely,

Sarah L. Vega, Assistant to

ERICA N. HUGHES, Esq.

/slv

Enclosures

### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.508, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	SUNSET VENTURES, LLC	_	_
	(Name of foreign limited liability company)	*	****
	PENNSYLVANIA 3. 02-0678752		
	Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)		<del>-</del> ,
4.	2/10/2003  5. Perpetual (Duration: Year limited liability company will		
	(Date of Organization) (Duration: Year limited liability company will exist or "perpetual")	cease to	•
6.	(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)	·	· · · · · · · · · · · · · · · · · · ·
	402 W. Lancaster Avenue, Haverford, PA 19041		
7.	402 VV. Laticaster Avenue, Flaveriold, FA 19041	्	_
		7 W	,
	(Street address of principal office)		Ţ
8.	If limited liability company is a manager-managed company, check here	25	[
9	The name and usual business addresses of the managing members or managers are as follows	n g <b>æ</b>	Ü.
٠.	22.3	<del>≥</del> exp	
	Pasquale W. Croche, 402 W. Lancaster Avenue, Haverford, PA 19041	- 6	
		<del></del>	
10.	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having cu	stody 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	;nlangua;	ge, 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: Real Estate		
,	(din navol		
	Eusa 110 mmes		<del></del>
	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.)

Typed or printed name of signee

Erica N. Hughes AUthorized Representative

## 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.

<ol> <li>The name of the Limited Liability Comp</li> </ol>	oany is:
--	----------

SU	INS	ET'	<b>VEN</b>	JTL	JRES	S. L	LC
----	-----	-----	------------	-----	------	------	----

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

Erica N. Hughes		SEC	ස	
(Name)		2000年		7
500 Fleming Stree	SEE SEE	K		
Florida str				
Key West	FL_ 33040	ORIDA	800	
	(City/State/Zip)			•

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.

Euca notypes (signature)

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

## COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

June 05, 2003

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

#### SUNSET VENTURES, LLC

is duly organized 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

SECRET STATE STATE OLL AND SEQUENT STATE

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.

Secretary of the Commonwealth

tchilds