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Florida Department of State  
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To:

Division of Corporations  
Fax Number : (850)205-0383

From:

Account Name : AGENTS AND CORPORATIONS, INC  
Account Number : I20010000112  
Phone : (302)575-0875  
Fax Number : (302)575-0925

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**FOREIGN LIMITED LIABILITY COMPANY**

**167 Springs-Fireplace Road LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

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7/17/03

Jul-17-2003 01:40pm From-DAVID WILLIAMS LAW FIRM PA  
Jul-18-2003 11:29am From-DAVID WILLIAMS LAW FIRM PA

302-575-0925  
302-575-0925

T-908 P.002/004 F-989  
T-775 P.002/008 F-822

**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 TRANSACTIONS BUSINESS IN THE STATE OF FLORIDA:**

1. 167 Springs-Fireplace Road, LLC  
(Name of foreign limited liability company)
2. New York  
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 11-3559156  
(FBI number, if applicable)
4. May 22, 2000  
(Date of organization)
5. Perpetual  
(Duration: Year limited liability company will cease to exist or "perpetual")
6. Upon Qualification  
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 617.153, F.S.))
7. 21 Squires Path  
East Hampton, NY 11937  
(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:  
Robert Cooper 21 Squires Path, East Hampton, NY 11937  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
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: Real Estate

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.)

Robert Cooper  
Typed or printed name of signer

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**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: \_\_\_\_\_

167 Springs-Fireplace Road, LLC

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

Agents and Corporations, Inc.

(Name)

773 4th Avenue North

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

Naples

FL

34102

(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.*

David Williams

(Signature)

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

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**State of New York** } ss:  
**Department of State**

*I hereby certify, that 167 SPRINGS-FIREPLACE ROAD LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 05/22/2000, and that the Limited Liability Company is subsisting so far as shown by the records of the Department.*

\*\*\*

*Witness my hand and the official seal  
of the Department of State at the City  
of Albany, this 07th day of July  
two thousand and three.*

*Secretary of State*

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