# M04000001/32

(Requestor's Name)  (Address)	900030
(Address) (City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	V3/25/0
(Business Entity Name)	
(Document Number)  Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	





)835259

)4--01001--U13 \*\*155.00









Fictitious Name

Reinstatement

Name Reservation

UCC FILING & SEARCH SERVICES, INC. 526 East Park Avenue
Tallahassee, Florida 32301
(850) 681-6528

HOLD
FOR PICKUP BY
UCC SERVICES
OFFICE USE ONLY

March 25, 2004

CORPORATION NAME (S) AND DOCUMENT NUMBER

CL-2, LLC

	CL-2, LL.	<b>-</b>	22/24 40
			3
Filing Evidence  Plain/Confirmation	n Copy	Type of Docume	
□ Certified Copy		☐ Certificate of Go	od Standing
		☐ Articles Only	
Retrieval Reque	<u>st</u>	☐ All Charter Docu Articles & Amen ☐ Fictitious Name	dments
☐ Certified Copy		Other	
NEW FILINGS		AMENDMENTS	
Profit		Amendment	
Non Profit		Resignation of RA Officer/Director	
Limited Liability		Change of Registered Agent	
Domestication		Dissolution/Withdrawal	
Other		Merger	
OTHER FILINGS		REGISTRATION/QUALIFICATION	
Annual Reports	X	Foreign	

Limited Liability

Reinstatement

Trademark

Other

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

MITED LIABILITY COMPANY TO TRANSACT BUSINESS	S IN THE STATE OF	T LONDA			20
CL-2, LLC	•				97
(Name of f	oreign limited liabil	ity company	7)		3
Delaware	3 20-0046	5553			ŕ
urisdiction under the law of which foreign limited lia company is organized)	bility	(FEI n	umber, if appl	icable)	
6/12/03	5. Perpetu	al			
(Date of Organization)	(Durati	on: Year lin	nited liability of t or "perpetual	ompany w	ill cease to
Upon qualification			_		
(Date first transacted business in Florid	da. (See sections 60	8.501, 608.	502, and 817.1	55, F.S.)	
7478 Bublin Drive	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	<u> </u>		**	
					<del></del>
Boca Raton, Florida 33433					
(Street	address of principal	office)	_		
The name and usual business addresses of th	ne managing mer	nbers or n		as follov	vs:
	ne managing mer	nbers or n		as follov	vs:
The name and usual business addresses of th	ne managing mer	nbers or n		as follov	vs:
The name and usual business addresses of th	ne managing mer	nbers or n		as follov	vs:
The name and usual business addresses of the SGH Services, Inc., 7478 Bublin Drive, Boca R	ne managing mer	nbers or n		as follow	vs:
The name and usual business addresses of the SGH Services, Inc., 7478 Bublin Drive, Boca R	ne managing mer	nbers or n		as follow	vs:
The name and usual business addresses of the SGH Services, Inc., 7478 Bublin Drive, Boca R	ne managing mer	nbers or n		as follow	vs:
The name and usual business addresses of the SGH Services, Inc., 7478 Bublin Drive, Boca R	ne managing mer	nbers or n	nanagers are		
The name and usual business addresses of the SGH Services, Inc., 7478 Bublin Drive, Boca R.  Attached is an original certificate of existence, no more	ne managing mer laton, Florida 3343	nbers or n	nanagers are	ial having	custody of re
The name and usual business addresses of the SGH Services, Inc., 7478 Bublin Drive, Boca Research Services, Inc., 7478 Bublin Bublin Bu	ne managing mer laton, Florida 3343 ethan 90 days old, du (A photocopy is not	nbers or n  33  ly authentic acceptable.	nanagers are	ial having	custody of re
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Attached is an original certificate of existence, no more the jurisdiction under the law of which it is organized.	e than 90 days old, days o	nbers or n  33  lly authentic acceptable.  i in Floric	nanagers are  ated by the offic  If the certificate  a: Ownershi	ial having is in a fore	custody of re ign languag

Stewart Harris, President of SGH Services, Inc., Manager

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 o	of the Limited Liability Company is:
CL-2, LLC	
2. The name a	and the Florida street address of the registered agent and office are:
	NRAI Services, Inc.
	- (Maille)
,	Florida street address (P.O. Box NOT ACCEPTABLE)
	Tallahassee FL 32301
•	(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. NRAI Services, Inc.

By: Campo test, Asst. Sec.

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

PAGE 1

## Delaware

#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CL-2, 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 TWENTY-THIRD DAY OF MARCH, A.D. 2004.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CL-2, LLC" WAS FORMED ON THE TWELFTH DAY OF JUNE, A.D. 2003.



Warriet Smith Windson Secretary of State

AUTHENTICATION: 3005065

DATE: 03-23-04

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