

m04 0060004382

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

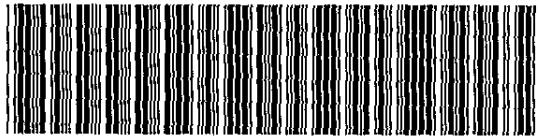
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 926928 5011958

AUTHORIZATION

Patricia Pigato

COST LIMIT : \$ 155.00

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

ORDER DATE : October 14, 2004

ORDER TIME : 10:42 AM

ORDER NO. : 926928-005

CUSTOMER NO: 5011958

CUSTOMER: Ms. Linda Phillips
Greenspoon Marder Hirschfeld
Suite 500
201 East Pine Street
Orlando, FL 32801

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

FOREIGN FILINGS

NAME: AMERIELITE DEVELOPMENT AND
MANAGEMENT LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward -- EXT# 2935

EXAMINER: _____

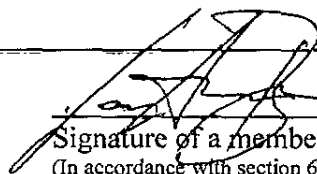
*****OUR CLIENT HAS A HUGE CLOSING TOMORROW AND NEEDS
FILED EVIDENCE BY THEN. I WOULD GREATLY APPRECIATE ANYTHING
YOU CAN DO.

FILED
04 OCT 14 PM 2:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

1. AMERIELITE DEVELOPMENT AND MANAGEMENT LLC
(Name of Foreign Limited Liability Company)
2. NEW JERSEY
(Jurisdiction under the law of which foreign limited liability company is organized)
3. _____
(FEI number, if applicable)
4. September 4, 2003
(Date of Organization)
5. 30 Years
(Duration: Year limited liability company will cease to exist or "perpetual")
6. Upon qualification
(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 4 Lyncrest Drive
Paramus, New Jersey 07652
(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:
Ian Alan Brenner, Jr., 1230 Aquila Loop, Celebration FL 34747
James A. Hallihan, 4 Lyncrest Drive, Paramus, New Jersey 07652
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: Commerical 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.)
Ian Alan Brenner, Jr.

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:

AMERIELITE DEVELOPMENT AND MANAGEMENT LLC

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

IAN ALAN BRENNER, JR.

(Name)

1230 Aquila Loop

Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

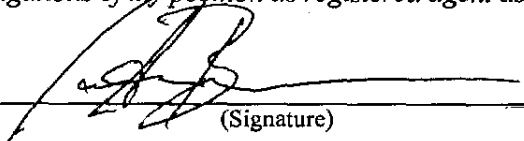
Celebration

FL

34747

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, Florida Statutes.


(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

AMERIELITE DEVELOPMENT AND MANAGEMENT LLC

0400037598

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 September 4, 2003.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

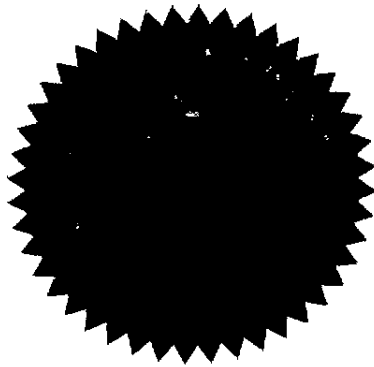
I further certify that the registered agent and registered office are:

James A Hallihan
4 Lyncrest Drive
Paramus, NJ 07652

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STATE OF NEW JERSEY
DEPARTMENT OF TREASURY
SHORT FORM STANDING

AMERIELITE DEVELOPMENT AND MANAGEMENT LLC



IN TESTIMONY WHEREOF, I have
hereunto set my hand and
affixed my Official Seal
at Trenton, this
23rd day of September, 2004

A handwritten signature in black ink, which appears to read "John E. McCormac". The signature is fluid and cursive, written in a professional style.

John E McCormac, CPA
State Treasurer