# M0500000000000000

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





600041486506

U1/25/U5--01009--023 \*\*55.00

11/03/04--01012--008 \*\*70,00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

MOS-(130)



January 25, 2005

LEONARD FEINSTEIN 5440 N. STATE ROAD 7, #204 FT. LAUDERDALE, FL 33319

SUBJECT: LENMAR PROPERTIES L.L.C.

Ref. Number: W04000040989

We have received your document for LENMAR PROPERTIES L.L.C. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6020.

Tammi Cline Document Specialist

Letter Number: 205A00005053



### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

November 8, 2004

LEONARD FEINSTEIN 5440 N. STATE ROAD 7, #204 FT. LAUDERDALE, FL 33319

SUBJECT: LENMAR PROPERTIES L.L.C.

Ref. Number: W04000040989

We have received your document for LENMAR PROPERTIES L.L.C. and check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following reason(s):

There is a balance due of \$55.00. Refer to the attached fee schedule for the breakdown of fees. Please return a copy of this letter to ensure your money is properly credited.

The fees to file a Florida Limited Liability Company or register a Foreign Limited Liability Company are as follows: \$100 filing fee; and \$25 registered agent designation fee. Please include an additional \$30 for each certified copy requested (optional) and \$5.00 for each certificate of status requested (optional).

We are enclosing the proper form(s) with instructions for your convenience.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6020.

Tammi Cline Document Specialist

Letter Number: 104A00063832

## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		- 1		
SUBJECT: Lenmar	(Name of Limited I	Jability Company	<u> </u>	 '**
The enclosed "Application by Forei Florida," Certificate of Existence, a liability company to transact busine	nd check are submit			
Please return all correspondence co	ncerning this matter	to the following:		TAL S
		Person)		NS FEB -7 PM I
	(Firm Co	ompany)	22.0	
5440	Ma 5/2 (Add	ress)	al 7#.	20 Y
Fto c	(City/State ar	nd Zip Code)	<i>333/9</i>	
For further information concerning	this matter, please ca	all:		
Consider (Name of Per	rson)	( <u>959)</u> (Area Code & Da	77-//4 ytime Telephone N	umber)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399		MAILING A Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7	
Enclosed is a check for the following	ig amount:			
☐ \$125.00 Filing Fee ☐ \$130	0.00 Filing Fee & 🔲 Certificate of Status	\$155.00 Filing Fee & Certified Co		ee, Certificate us & Certified Copy

## 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: company is organized) (Duration: Year limited liability company will cease to exist or "perpetual") Date first transacted business in Florida, if prior to registration. Street Address of Principal 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: \equiv 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: 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

## 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.

<u></u>		. ,
TALI	200	
CRETAR AHASS	SFEB-	<u>1</u>
Y OF ST	7 PH	I.ED
ATE RIDA	: 59	
	TALLAHASSEE, FLORIDA	-7 PH :5

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)

# COMMON WEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

January 07, 2005

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

#### LENMAR PROPERTIES, 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



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