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#### **COVER LETTER**

Regressition Section Division of Corporations

SUBJECT:	MCSNAB Developers LLC			
_				
Florida," Cert	"Application by Foreign Limited Liability Company for Authorization to Transficate of Existence, and check are submitted to register the above referenced to transact business in Florida			1
Please return a	all correspondence concerning this matter to the following:	<u>.</u> .		
	Philip L. Logas, Esq.	1.12.13. 1.12.13.	05 DEC	
	(Name of Person)		22	
	Philip L. Logas, P. A.	CF STATE E. FLORIDA	AM 7:	Ë
	(Firm/Company)	<b>BH</b>	7:48	
	55 East Pine Street	<del></del>		
	(Address)			
	Orlando, Florida 32801			

For further information concerning this matter, please call:

Philip L. Logas, Esq. (Area Code & Daytime Telephone Number) (Name of Person)

(City/State and Zip Code)

**MAILING ADDRESS:** 

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Enclosed is a check for the following amount:

□\$155.00 Filing Fee & XX \$160.00 Filing Fee, Certificate □\$125.00 Filing Fee □\$130.00 Filing Fee & Certificate of Status Certified Copy of Status & Certified Copy



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

December 13, 2005

PHILIP L LOGAS ESQ 55 EAST PINE STREET ORLANDO, FL 32801

SUBJECT: MCSNAB DEVELOPERS LLC

Ref. Number: W05000054797

SECREDITY OF STATE

We have received your document for MCSNAB DEVELOPERS LLC and your check(s) totaling \$160.00. However, the document has not been filed and is being retained in this office for the following:

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) 245-6097.

Marsha Thomas Document Specialist

Letter Number: 005A00071665

### 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.

	Developers LLC			<u> </u>	<u> </u>
	(Name of Forei	gn Limited Lia	bility Company)		
Delese		. 3_	20-327289	5	Zσ
urisdiction unde	er the law of which foreign limit	ed liability.	(FEIn	umber, if applicable)	20
ompany is organ	BZEC)		,		三 三哥
July 2	22, 2005	5.	Perpetual		55
(D	ate of Organization)		(Duration: Year lim	ited liability company	will cease to
		•	exist or "perpetual"	)	₩.C
Novembe	er 11, 2005			-	ÓS.
	Date first transacted by	isiness in Flori	da, if prior to registra	ion.)	
	(See sections 608,501 &	608.502 F.S. to	determine penalty lis	ability)	₽
177 CB	402, Westerlo, N	ew York	12193	•	
	(Str	eet Address of	Principal Office)	<u></u>	
	dusual business addresses of Quinn - 177 CR 4		-	_	ows:
			-	_	OW6:
James F.  Attached is an or  unisdiction under		102, West	cerlo, New Y	ork 12193	g custody of reco
James F.  Attached is an or  unisdiction under	Quinn - 177 CR 4	norethan 90 day (A photocopy in	cerlo, New Y sold, duly authenticat snotacceptable. If the	ork 12193 ed by the official having certificate is in a foreign	g custody of reco
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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:	
MCSNAB	Developers LLC	05 D
2. The name and	d the Florida street address of the registered agent and office are:	DEC 22 1
	Philip L. Logas, Esq.	AH 7 CF SI FL QF
	(Name)	7: 49 STATE OHIDA
	55 East Pine Street	
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	, -
	Orlando FL 32801 City/State/Zip	
liability company agent and agree relating to the pr obligations of my	ned as registered agent and to accept service of process for the above stated at the place designated in this certificate, I hereby accept the appointment to act in this capacity. I further agree to comply with the provisions of a oper and complete performance of my duties, and I am familiar with analyposition as registered agent as provided for in Chapter 608, Florida States (Signature)	ent as registered Il statutes I accept the

\$ 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 York Department of State } ss:

I hereby certify, that MCSNAB DEVELOPERS, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 07/22/2005, and that the Limited Liability Company is existing 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 19th day of December two thousand and five.

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