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SECRETARY OF STATE TO SECRETARY OF SECRETARY

#### **COVER LETTER**

TO: Registration Section Division of Corporations		
Division of Corporations		
SUBJECT: Advisor Due Diligence (Name of Lim	e Center, LLC ited Liability Company)	
The enclosed "Application by Foreign Limited Lia Florida," Certificate of Existence, and check are su liability company to transact business in Florida		
Please return all correspondence concerning this m	natter to the following:	
Scott R. Ando	1501	
	me of Person)	
Advisor Due Dili	m/Company)	DIVISION OF BY
5204 G/enna	er Driek	<b>₹</b> ₹
	(Address)	= 85
West Palm Band (City/Sta		AMII: 33
For further information concerning this matter, ple	ase call-	
	at ( <u>56/</u> ) <u>688-2025</u> (Area Code & Daytime Telephone Numbe	r)
,	(	-)
MAILING ADDRESS:	STREET ADDRESS:	
Division of Corporations	•	
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a check for the following amount:  \$\Bigsim \mathbb{\text{\$\frac{1}{2}}}\$125.00 Filing Fee \$\Bigsim \mathbb{\text{\$\frac{1}{2}}}\$Certificate of	☑\$155.00 Filing Fee & ☐\$160.00 Filing Fee, Ce Status Certified Copy of Status & C	



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

May 15, 2006

SCOTT R. ANDERSON ADVISOR DUE DILIGENCE CENTER, LLC 5204 GLENMOOR DRIVE WEST PALM BEACH, FL 33409

SUBJECT: ADVISOR DUE DILIGENCE CENTER, LLC

Ref. Number: W06000022234

DIVISION OF HAY 24 AHII: 34

We have received your document for ADVISOR DUE DILIGENCE CENTER, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the complete principal's office address.

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) 245-6043.

Joey Bryan Document Specialist

Letter Number: 206A00034072

Fig. 52 - No. 1 to the Society of sitting that the Children of the Comment of the Society of Societ

## 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: (Name of oreign Limited Liability Company) company is organized) 3-1-2006 (Date of Organization) (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 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: Scott R. Anderson 5204 Glanmast Dry West Palm Beach, FL 33409 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: Research and Ignature 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.)

Inderson

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.

•
SECRET VISION
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II: 34
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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.

Jacquelie M anderson

\$ 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

### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY " ADVISOR DUE DILIGENCE CENTER, 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 THIRTEENTH DAY OF APRIL, A.D. 2006.

SECRETARY OF STATE DIVISION OF CORPORATIONS



Darriet Smith Windson, Secretary of State

AUTHENTICATION: 4667452

DATE: 04-13-06

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