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To:

Division of Corporations

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From:

Account Name

: TRIVEST' SERVICE CORPORATION

Account Number : I20020000111

Phone Fax Number : (305)858-2200 : (305)858-1629

## FLORIDA/FOREIGN LIMITED LIABILITY CO.

#### Boyne Capital Advisors, LLC

Certificate of Status	1
Certified Copy	0
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Estimated Charge	\$130.00

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7/24/2006

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

IN COMPLIANCE WITH SECTION 808508, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Boyne Capital Advisors, LUC (Name of Foreign Limited Liability Company) 2. DE (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) May 3, 2006 Perpetual (Duration: Year limited liability company (Date of Organization) exist or "perpetual") Upon qualification in Florida (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 7333 Vistalmar Street 7. Coral Gables, FL 33143 (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: Derek A. McDowell, 7333 Vistalmar Street, Coral Gables, FL 33143 James R. Malone, 5150 N. Tamismi Trail, Shite 600, Naples, FL 34105 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: investment on 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.)

Typied or printed name of signee

Derek A. McDowell, Member

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# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO	O THE PROVISIONS	OF SECTION 608.415 or 608.507, FLORIDA S	STATUTES, THE	
UNDERSIGNE	D LIMITED LIABILI	ITY COMPANY SUBMITS THE FOLLOWING	3 STATEMENT	
TO DESIGNAT	TE A REGISTERED (	OFFICE AND REGISTERED AGENT IN THE S	STATE OF	
FLORIDA.		;		-
1. The name of	f the Limited Liability	/ Company is:	ETARY OF ST	C B
2. The name ar	nd the Florida street a	ddress of the registered agent and office are:	O O	
	Derck A. McDowell	•		
		(Name)	<b></b>	
	7333 Vistalmar Street	· ·		
	Florida St	neet Address (P.O. Box NOT ACCEPTABLE)		•
	Coral Gables	FL 33143		
		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.

By H JU

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

# Delaware

PAGE 1

### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BOYNE CAPITAL ADVISORS, 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-FIRST DAY OF JULY, ASD, 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BOYNE PAPITAL ADVISORS, LLC" WAS FORMED ON THE THIRD DAY OF MAY, A.D. 2006 ~

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE.

Variet Smile Hinacon
Harriet Smith Windson, Secretary of State

AUTHENTICATION: 4919333

DATE: 07-21-05

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