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(Requestor's Name)	
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PICK-UP WAIT	MAIL
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(Coordinate Number)	
(Document Number)	
Certified Copies Certificates	of Status
Special Instructions to Filing Officer:	
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SECRELARY OF STATE

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#### **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Blue Sky Settlement Services, LLC (Name of Limited Liability Company)		
(Name of Limited Liability Company)		
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida		
Please return all correspondence concerning this matter to the following:		
Joshua Negrich (Name of Person)		
(Name of Person)		
Maro Law Offices		
VIGRO LAW OFFICES (Firm/Company)		
304 Turnpike Rd.		
(Address)		
SouthBoro, MA 01772		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
Name of Person)  Negrida (SOB) 281-5176  (Area Code & Daytime Telephone Number)		
(Name of Person) (Area Code & Daytime Telephone Number)		
MAILING ADDRESS: STREET ADDRESS:		
Division of Corporations 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:  \$\sum_{125.00}\$ \text{Filing Fee}  \sum_{130.00}\$ \text{Filing Fee & } \sum_{155.00}\$ \text{Filing Fee & } \sum_{160.00}\$ \text{Filing Fee, Certificate} \text{Certified Copy} \text{of Status & 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:

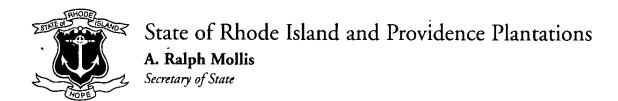
1	Blue Sky Settlement Services, LLC (Name of Foreign Limited Liability Company)
2	Rhode I Sland  urisdiction under the law of which foreign limited liability  (FEI number, if applicable)
C	ompany is organized)
4.	(Date of Organization)  5. Perpetual  (Duration: Year limited liability company will care to exist or "perpetual")
•	(Date of Organization) (Duration: Year limited liability company will care to exist or "perpetual")
О	(Date first transacted business in Florida, if prior to registration.)
	mc v d
7.	304 Turnpike Rd.
	Southoro, MA 01772 STILL Street Address of Principal Office)
-	(Street Address of Principal Office)
	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:
	Daniel J. NIGRO, Manager, 304 Turnpike Rd., Southours, MA 01772 Joshua Negrich, Manager, 304 Turnpike Rd., Southours, MA 01772
	01772
	Joshua Negarch, manager, 304 Turnpike Kd., Southooro,
	MA 01772
thej	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in urisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a slation of the certificate under oath of the translator must be submitted.)
11.	Nature of business or purposes to be conducted or promoted in Florida:
í	Peal estate title searches/certification: real estate chasings
-	Leal estate title searches/Certification; real estate clasings
	Signature of a member of 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.)
	<u> </u>
	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:  Blue Sky Settlement Services, LL
2. The name and the Florida street address of the registered agent and office are:
Boston National Title, LLC
S452 South US Highway 1, Port Sta Lacie Florida Street Address (P.O. Box NOT ACCEPTABLE)
ASSEE 34952 P
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.
Richard D. ShedSignature) Boston National Title

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



The Office of the Secretary of State of the State of Rhode Island and Providence Plantations, HEREBY CERTIFIES, that

### Blue Sky Settlement Services, LLC

a Rhode Island limited liability company, filed original articles of organization in this office on the 19<sup>th</sup> day of October, 2006; and

IT IS FURTHER CERTIFIED that as of this date said company is duly organized and existing under and by virtue of the laws of the State of Rhode Island.

SIGNED AND SEALED this eleventh day of January, A.D. 2007.

Secretary of State

By Illia Ontorelli

