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SECRETARY OF STATE OF

#### **COVER LETTER**

	istration Section ision of Corporations		
SUBJECT:	Turnstile Custom Publishing LLC	Limited Liability Company)	
	(Name of I	Sinited Blabinty Company)	
Florida," Ce		Liability Company for Authorization to Transa e submitted to register the above referenced for a	
Please retur	n all correspondence concerning the	is matter to the following:	
	Laurie Longi		
		(Name of Person)	_
	Whitman Breed Abbott & Mo	organ LLC	_0 =
	·	(Firm/Company)	SECRETARY STATE INTEGRATION OF JUN-8 PM 1: 57
	100 Field Point Road		-8 -8-15-15-15-15-15-15-15-15-15-15-15-15-15-
		(Address)	PA DIRPOR
	Greenwich, CT 06830		7: 57 Alley
	(City	y/State and Zip Code)	<del>-</del> 55
For further	information concerning this matter,	please call:	
Lau	urie Longi	at ( 203 ) 862-2397	
	(Name of Person)	(Area Code & Daytime Telephone Nu	mber)
Divi P.O.	ision of Corporations . Box 6327 ahassee, FL 32314	STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
	a check for the following amount: 125.00 Filing Fee \$\square\$	e & ☑\$155.00 Filing Fee & □\$160.00 Filing Fe	ee, Certificate s & Certified Cop

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Na	me of Foreign Limited	d Lia	ability Company)	
Delaware		.3.	20-3983793	
Jurisdiction under the law of which f ompany is organized)	oreign limited liability	γ	(FEI number, if applicable)	
December 7, 2005	•	5.	Perpetual	
(Date of Organization)			(Duration: Year limited liability company will cea exist or "perpetual")	se to
Decembe	r 7, 2005			
(Date first t	ransacted business in	Flor .S. t	ida, if prior to registration.) o determine penalty liability)	,
1500 Park Center Drive	ar ar and a second	٠,		_
Orlando, FL 32835-5705	्राष्ट्रीकार्ताहरू है। अस्तिकारिकार अस्तिकार	<i>.</i>	· *	
	(Street Addre	55 O	Principal Office)	= :
If limited liability company is	a mananar-manan	ad a	🗖	, :
• •	a manager-manage	cu c		
The name and usual business a	addresses of the m	ana	ging members or managers are as follows:	o PM I:
	addresses of the m	ana ndo	ging members or managers are as follows:	
The name and usual business a	addresses of the m	ana ndo	ging members or managers are as follows:	o PM I:
The name and usual business a Ramsey E. Crain, 1500 Park ( Merrilee P. Crain, 1500 Park  Attached is an original certificate of ex-	center Drive, Orlar Center Drive, Orlar	ana ando and	ging members or managers are as follows:  FL 32835-5705  Jo, FL 32835-5705  Tys old, duly authenticated by the official having custody is not acceptable. If the certificate is in a foreign langua	y of nex
The name and usual business a Ramsey E. Crain, 1500 Park of Merrilee P. Crain, 1500 Park  Attached is an original certificate of ex- jurisdiction under the law of which it instation of the certificate under eath of	center Drive, Orlar Center Drive, Orlar	ana ando, ando ando	ging members or managers are as follows:  FL 32835-5705  Jo, FL 32835-5705  Tys old, duly authenticated by the official having custody is not acceptable. If the certificate is in a foreign langua	y of nex
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Typed or printed name of signee

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Consideration of the con-

#### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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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 the S FLORIDA.

1.	The	name	of the	Limited	Liabilit	y Compan	y is:
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#### Turnstile Custom Publishing LLC

2.	The name and the	Florida street address	of the registered	l agent and	office are:
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assistant 🗀

130 TURNSTILE ENTERPRISES, INCORPORATED (Name) 1500 PARK CENTER DRIVE Florida Street Address (P.O. Box NOT ACCEPTABLE) With a cong Orlando 32835-5705

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.

Clty/State/Zip

Clayton Morris (Signature)

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$\frac{1}{2} 5.00\tau\_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 "TURNSTILE CUSTOM PUBLISHING 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 THIRTIETH DAY OF MAY, A.D. 2007.

SECRETARY OF STATE
DIVISION OF CORPORATIONS



4072636 8300

070643976

Darriet Smith Hindson

Harriet Smith Windsor, Secretary of State

**AUTHENTICATION: 5716674** 

DATE: 05-30-07