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(Requestor's Name)		
(Address)		
(Address)		
·		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
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SECRETARY OF STATE

COVER LETTER

Registration Section

Division of Corporations			
SUBJECT: Prudence (Name of Lin	nited 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 r	matter to the following:		
Rafael In	ame of Person)		
Prudence LCC (Firm/Company)			
. (Fi	rm/Company)		
2127 Brichell Ave. Apt. #1404 (Address)			
Miami FL 33129 (City/State and Zip Code)			
For further information concerning this matter, please call:			
(Name of Person)	at (347) 384 - 3830 (Area Code & Daytime Telephone Number)		
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: \$\Bigsim \frac{1}{3}125.00 \text{ Filing Fee} \text{ Silonon Filing Fee & Certificate o}	\$155.00 Filing Fee & \$\infty\$\$\$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$		



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 20, 2007

RAFAEL IRIBARREN 2127 BRICKELL AVENUE APT. #1404 MIAMI, FL 33129

SUBJECT: PRUDENCE LLC Ref. Number: W07000056898

We have received your document for PRUDENCE LLC and your check(s) totaling \$130.00. 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) 245-6067.

Neysa Culligan Document Specialist

Letter Number: 407A00066607

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. Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")			
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability			
Company," "L.L.C.," "LIC.")			
2. Delaware (Jurisdiction under the law of which foreign limited liability) 3. QG-1294352 (FEI number, if applicable)			
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)			
4. 10/19/07 (Date of Organization) 5. Perpetua (Duration: Year limited liability company will cease to exist or "perpetual")			
6. Has not yet transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)			
00m - 0			
7. 2127 Brichell Ave. # 1404			
7. Alat Brichell Ave. # 1404 Miami, FL 33129 (Street Address of Principal Office)			
Miami, FL 33129 (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:			
Rafael Maria Iribarren			
2127 Brichell Ave. #1404			
Miami, FL 33129			
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 eath of the translator must be submitted.)			
11. Nature of business or purposes to be conducted or promoted in Florida:			
Advisor.			
Signature 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.)			
RAFAEL TLIBACE FN			

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:	
Prudence LLC	
If name unavailable, the alternate name to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office are:	O7 DE
Grizel Gil	子が一
Florida Street Address (P.O. Box NOT ACCEPTABLE) Cocal Coables FL 33134 City/State/Zip	AMIO: 17 SSEE FLORIDA
Having been named as registered agent and to accept service of process for the above s liability company at the place designated in this certificate, I hereby accept the appoint agent and agree to act in this capacity. I further agree to comply with the provisions of relating to the proper and complete performance of my duties, and I am familiar with a obligations of my position as registered agent as provided for in Chapter 608, Florida S (Signature)	ment as registered f all statutes and accept the

\$ 100.00 Filing Fee for Application

\$ 30.00

\$ 25.00 Designation of Registered Agent Certified Copy (optional)

5.00 Certificate of Status (optional)

Delaware

The First State

1, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PRUDENCE 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-NINTH DAY OF NOVEMBER, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PRUDENCE LLC" WAS FORMED ON THE NINETEENTH DAY OF OCTOBER, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

4443824 8300 071267993



DATE: 11-29-07

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