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SECRETARY OF STATE
AND ASSEE, FLORID

D. BRUCE
JAN 2 8 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: LTL Architects, PLLC				
	ted Liability Company)			
The enclosed "Application by Foreign Limited Liab Florida," Certificate of Existence, and check are sub liability company to transact business in Florida				
Please return all correspondence concerning this ma	atter to the following:			
Mr. Paul Lewis				
(Nar	me of Person)			
LTL Architects, PLLC				
(Firr	m/Company)	ALL/	r 80	المقسه
227 W. 29th Street, 7th Flo	or	AHAS	JAN 28	* 5
((Address)	SEE.		
New York, NY 10001		FLORIC FLORIC	PM 12: 35	Ö
(City/Sta	ate and Zip Code)	D, T	0,	
For further information concerning this matter, plea	ase call:			
Kathryn M. van Voorhees	at (212) 505-5955 x 57			
(Name of Person)	(Area Code & Daytime Telephone	Numbe	er)	
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: \$\sum \\$125.00 \text{ Filing Fee} \sum \\$130.00 \text{ Filing Fee & Certificate of }\$	□\$155.00 Filing Fee & □\$160.00 Filing Status Certified Copy of S	ng Fee, C Status & (

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 HABILITY COMPANY TO TRANSACT RUSINESS IN THE STATE OF FLORIDA:

1. LTL Architects, PLLC (Name of Foreign Limited Liability Company; must include	
(If name unavailable, enter alternate name adopted for the purpose consent of the managers or managing members adopting the altern Company," "L.L.C.," "LLC.")	e of transacting business in Florida and attach a copy of the written nate name. The alternate name must include "Limited Liability
2 New York State 3.	03-0463424
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable
	12/31/2042
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6. N/A	S.F.S. S.F.S.
(Date first transacted business in Flor (See sections 608.501 & 608.502 F.S.)	rida, if prior to registration.)
227 W. 29th Street, 7th Floor	P. T.
7. 227 W. 29th Street, 7th 1 1001	·
New York, NY 10001	
(Street Address o	f Principal Office)
8. If limited liability company is a manager-managed of	company, check here
9. The name and usual business addresses of the mana	ging members or managers are as follows:
Paul Lewis, Member, LTL Architects, PLL	.C/ 227 W. 29th St., 7th Fl./ NY, NY 10001
	PLLC/ 227 W. 29th St., 7th Fl./ NY, NY 10001
the jurisdiction under the law of which it is organized. (A photocopy translation of the certificate under oath of the translator must be subm	itted.)
11. Nature of business or purposes to be conducted or	promoted in Florida:
Architectural services	<u>′</u>
The text	
	horized representative of a member.
(In accordance with section 608.408(3), F.S. an affirmation under the penalties of perju	S., the execution of this document constitutes ry that the facts stated herein are true.)
Mr. Paul Lewis	y
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:		
LTL Architects, PLLC		
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:	08 JAN 28 SECRETAR TALLAHASS	angai
InCorp Services, Inc.	N 28 TAR HASS	
(Name)	EE.F	m "
17888 67th Court North	12: 35 STATE FLORID 	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	P DM CF	
Loxahatchee, FL 33470	_	
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.

(Signature)
(Signature)
(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 5.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)

State of New York Department of State } ss:

I hereby certify, that LTL ARCHITECTS, PLLC a NEW YORK Professional Service Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 07/31/2002, and that Professional Service Limited Liability Company is existing so far as shown by the records of the Department.

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 15th day of January two thousand and eight.

Special Deputy Secretary of State

ALLAHASSEE. FLORID

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