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SECRETARY OF STATIONS
DIVISION OF CORPORATIONS
OR APR 17 PM 1:27

J. BRYAN

APR 1 8 2008

EXAMINER

COVER LETTER

Divisi	on of Corporations		
SUBJECT:	CARTER TRANSACTI	imited Liability Company)	
The enclosed Florida," Cert	"Application by Foreign Limited	Liability Company for Authorization to Transe submitted to register the above referenced for	
Please return	all correspondence concerning this	s matter to the following:	
	SHELILYN	N ROSE	
	(Name of Person)	
	CARTER + ASSO	OCIATES, LLC (Firm/Company)	0.9
	(Firm/Company)	API
	171 17th STAR	EET , SuiTE 1200 (Address)	OB APR 17 PH 1: 27
		(Address)	PH PH
	ATLANTA, GA	4 30363 /State and Zip Code)	ANIOHS
For further in	formation concerning this matter,	please call:	
_St	HERI LYNN ROSE (Naine of Person)	at (404) 888 - 3116 (Area Code & Daytime Telephone N	umber)
Divisi P.O. E	on of Corporations Box 6327 Bassee, FL 32314	STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
	check for the following amount: 5.00 Filing Fee \$130.00 Filing Fee Certificate		Fee, Certificate us & 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.	CARTED TRANSACTION SERVICES, L. L. C. (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.		
_	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC	.``)	_
con	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a cop sent of the managers or managing members adopting the alternate name. The alternate name must include "Limito appany," "L.L.C.," "LLC.")		
	State of 6 2008 a 3. 26-1608341 Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)	-	_
(.l	ompany is organized)		
4.	(Date of Organization) 5. Terpetual (Duration: Year limited liability company will converted by the company will convert the converted by the company will convert the converted by the conver	ease to	_
6.	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)		_
7.	171 17th STREET, SUITE 1200	08 A	SECH
	ATLANTA, GA 30363 (Street Address of Principal Office)	* 	**************************************
	(Street Address of Principal Office)	22	CORP
8.	If limited liability company is a manager-managed company, check here		OR AT
9.	The name and usual business addresses of the managing members or managers are as follows:	23	SKS.
	CARTER + ASSOCIATES, LLC		_
	CARTER + ASSOCIATES, LLC 171 17th STREET, SUITE 1200		_
	ATLANTA, 64 30363		_
the j	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custo jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign languation of the certificate under eath of the translator must be submitted.)	uage, a	
11.	Nature of business or purposes to be conducted or promoted in Florida: Real Estate	Serv	145
_			_·
	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.)		
	BOD PETERS 6 N		
	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.

CANTER TRANSACTION SERVICES, LLC.	
name unavailable, the alternate name to be used in the state of Florida is:	
The name and the Florida street address of the registered agent and office are:	
CT Corporation System (Name)	08 AS
1200 South Pine Island Road	08 APR 17
(Name)	08 APR 17 PM 1: 2

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.

Danny Verdecchia, Jr. Asst. Sectretary

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Control No. 07102598

STATE OF GEORGIA

Secretary of State

Corporations Division
315 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Karen C Handel, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

CARTER TRANSACTION SERVICES, L.L.C.

Domestic Limited Liability Company

was formed or was authorized to transact business on 12/19/2007 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 27th day of March, 2008

Karen C Handel Secretary of State

Haren CHandel

Certification Number: 2543938-5 Reference: Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp