

M 0800000 2865

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

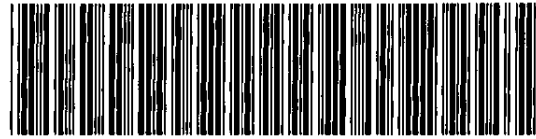
(Document Number)

Certified Copies _____

Certificates of Status _____

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06/18/08--01002--009 **155.00

FILED
08 JUN 13 PM 4:45
TALLAHASSEE, FLORIDA

KB/act

B. KOHR

JUN 17 2008

EXAMINER



800 388-2123

RECEIVED
MEMORANDUM PM 4:51

STATEMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
08 JUN 13 PM 4:15
TALLAHASSEE, FLORIDA

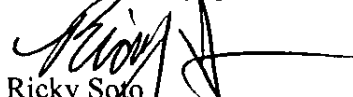
DATE: June 13, 2008
TO: BRENDA TADLOCK
FROM: RICKY SOTO
RE: CROSSLYN MAX II, INC. DISSOLUTION & LLC QUALIFICATION

Hi Brenda,

Per our phone conversation earlier today, enclosed please find dissolution filing for "Crosslyn Max II, Inc." and qualification for "Crosslyn Max II, LLC", along with a letter from the company. As the letter indicates, they inadvertently formed the domestic corporation when they should have qualified the foreign LLC. They have been doing business in FL under the LLC and have not used the corporation at all.

Please review the documents and determine what penalties your office will charge. Once you have determine such information, please contact me back at the below contact information so I may inform our client. The checks I have included with these filings cover the base filing fees; we will send payment of the penalty amount once you have determined what that amount should be.

If you have any questions or concerns, please do not hesitate to contact me. Thank you!


Ricky Soto
CorpDirect Agents, Inc.
800-388-2123, ext. 112
rickysoto@corpdirect.com

CROSSLYN MAX II, LLC

**9199 BONNIE COVE DRIVE
WEEKI WACHEE, FL 34613
352-597-0066**

April 30, 2008

FILED
08 JUN 13 PM 4:45
TALLAHASSEE, FLORIDA

Florida Secretary of State
Corporations Division
Post Office Box 6327
Tallahassee, Florida 32314

Re: Crosslyn Max II, Inc.
Charter No. P04000027059

Dear Sir or Madam:

Crosslyn Max II, LLC is a Delaware limited liability company that transacts business in Florida. We understand that Florida law requires foreign entities doing business in Florida to be authorized by the State of Florida to conduct business in the State of Florida. Our accountant advised us that creating Crosslyn Max II, Inc. would authorize Crosslyn Max II, LLC to transact business in Florida. We did not know that this would not authorize Crosslyn Max II, LLC to transact business in Florida. Crosslyn Max II, Inc. is currently and always has been a shell corporation that has never been used.

We have just received advice from an attorney who informed us that in order for Crosslyn Max II, LLC to be authorized to transact business in Florida, it must file an Application by Foreign Liability Company for Authorization to Transact Business in Florida (copy enclosed). Accordingly, we are dissolving Crosslyn Max, Inc. and request that you allow the qualification of Crosslyn Max II, LLC to transact business in Florida due to the dissolution of Crosslyn Max II, Inc.

We also respectfully request that you waive any penalties arising from Crosslyn Max II, LLC failing to timely file the Application by Foreign Liability Company for Authorization to Transact Business in Florida. The late filing of the form was inadvertent and as a result of paying the normal filing fees for Crosslyn Max II, Inc., the State of Florida has received fees that are equal to or greater than what would have been paid if Crosslyn Max II, LLC had properly qualified to transact business in Florida.

Thank you for your assistance and consideration.

Sincerely,


Robert J. McInerney

CORPDIRECT AGENTS, INC. (formerly CCRS)
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-14

FILED
08 JUN 13 PM 4:45
TALLAHASSEE, FLORIDA

CONTACT: RICKY SOTO

DATE: 06/13/2008

REF. #: 000262.88352

CORP. NAME: CROSSYLN MAX II, LLC.

- | | | |
|---|---|--|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input checked="" type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | | |
| <input type="checkbox"/> OTHER: | | |

STATE FEES PREPAID WITH CHECK# _____ FOR \$ 155.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ COST LIMIT: \$ _____

PLEASE RETURN:

- ☒ CERTIFIED COPY ☐ CERTIFICATE OF GOOD STANDING ☐ PLAIN STAMPED COPY
☐ CERTIFICATE OF STATUS

Examiner's Initials

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. **Crosslyn Max II, LLC**

(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.," "LLC.")

2. **Delaware**

(Jurisdiction under the law of which foreign limited liability company is organized)

3. **20-2388502**

(FEI number, if applicable)

4. **4/23/04**

(Date of Organization)

5. **perpetual**

(Duration: Year limited liability company will cease to exist or "perpetual")

6. **4/23/04**

(under PO#0000027059)
(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. **9199 Bonnie Cove Drive**

Weeki Wachee, FL 34613

(Street Address of Principal Office)

8. If limited liability company is a manager-managed company, check here ☐

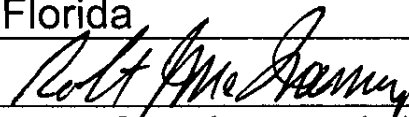
9. The name and usual business addresses of the managing members or managers are as follows:

Thomas E. McInerney, 9199 Bonnie Cove Drive, Weeki Wachee, Florida, 34613

Robert J. McInerney, 9199 Bonnie Cove Drive, Weeki Wachee, Florida, 34613

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 oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: **own and rent
real estate in Florida**


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.)

Robert J. McInerney

Typed or printed name of signee

FILED
JUN 13 PM 4:45
TALLAHASSEE, FLORIDA

**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:

Crosslyn Max II, 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:

Robert J. McInerney

(Name)

9199 Bonnie Cove Drive

Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

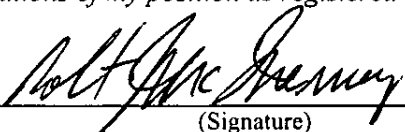
Weeki Wachee

FL

34613

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)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	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 "CROSSLYN MAX II, 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 THIRTEENTH DAY OF JUNE, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CROSSLYN MAX II, LLC" WAS FORMED ON THE TWENTY-THIRD DAY OF APRIL, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.



3794736 8300

080691526

You may verify this certificate online
at corp.delaware.gov/authver.shtml

Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6658589

DATE: 06-13-08