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(((H080001831493)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: CARLTON FIELDS

Account Number : 076077000355

Phone

: (813)223-7000

Fax Number

: (813)229-4133

ORIDA/FOREIGN LIMITED LIABILITY CO.

CFC Syndicate, LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

D. BRUCE

EXAMINER

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Help

No. 0496 P. 4

· Audit No. H08000183149 3

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CFC Syndicate, LLC
(Name of Limited 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 matter to the following:

David L. Theyssen	
(Name of Person)	
Cariton Fields, P.A.	108 JUL
(Firm/Company)	ASS S
4221 W. Boy Scout Boulevard, Suite 1000	
(Address)	ID: 01 STATE LORIDA
Tampa, FL 33607	
(City/State and Zin Code)	

For further information concerning this matter, please call:

(Name of Person)	at (813) 229-4107 (Area Code & Daytime Telephone Number)	
MAILING ADDRESS:	STREET ADDRESS:	
Division of Corporations	Division of Corporations	
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle	
	Tallahassee, FL 32301	
Enclosed is a check for the following amount:		



July 31, 2008

FLORIDA DEPARTMENT OF STATE Division of Corporations

CARLTON FIELDS

SUBJECT: CFC SYNDICATE, LLC

REF: W08000035762

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You failed to make the correction(s) requested in our previous letter.

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) 245-6984.

Deborah Bruce Regulatory Specialist II FAX Aud. #: H08000183149 Letter Number: 808A00043944

08 JUL 31 AH IO: 01
SECRETARY OF STATE



July 30, 2008

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CARLTON FIELDS

SUBJECT: CFC SYNDICATE, LLC

REF: W08000035762

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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) 245-6984.

Deborah Bruce Regulatory Specialist II FAX Aud. #: H08000183149 Letter Number: 708A00043787

SECRETARY OF STATE

· Audit No. H08000183149 3

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

	IN 608.503, FLORIDA STATUTES, OTRANSACT BUSINESS IN THE ST	THE FOLLOWING IS SUBMITTED TO REGISTER A TATEOFFLORIDA:	L FOREIGN
CFC Syndicat	e, LLC	·	•
		"Limited Liability Company," "L.L.C.," or "LLC.")	
-			lel
same unavailable, enter altern sent of the managers or mana, npany," "L.L.C.," "LLC.")	sie name adopted for the purpose	of transacting business in Florida and attach a copy of ste name. The alternate name must include "Limited L	iability
Delaware	3.		
Jurisdiction under the law of a company is organized)	which foreign limited liability	(PEI number, if applicable)	
May 8, 2008	5.	Perpetual	
(Date of Organ	zation)	(Duration: Year limited liability company will cease exist or "perpetual")	to
N/A		,	
	e first transacted business in Floriscotions 608.501 & 608.502 F.S. to	da, if prior to registration.) o determine penalty liability)	OB JUL 31
· ·	/icGrath Real Estat		AE -
	e Mabry Highway,		SS SS
19005 N. Dai		Principal Office)	- Min =
If limited liability comp	any is a manager-managed o	ompany, check here 🗸	AM ID: III SEE, FLORIDA
The name and usual bus	iness addresses of the manag	ging members or managers are as follows:	5 .7 -
Padraic Laior	Lalor O'Shea, 44	Tullow Street, Carlow, Ireland	
John O'Shea	Lalor O'Shea, 44	Tullow Street, Carlow, Ireland	
John Doyle	19005 N. Dale Ma	bry Hwy, Lutz, FL 33548	
juristiction under the law of w		ys oki, duly sufficializated by the official having custody is not acceptable. If the certificate is in a foreign language thed.)	
. Nature of business or p	ourposes to be conducted or I	promoted in Florida:	····
Ownership and	leasing of real esta	ate V	
(in se	esture of a member or an authoridance with section 608.408(3), F.S	horized representative of a member. i., the exception of this document constitutes by that the facts stated herein are true.)	

Typed or printed name of signee

Audit No. H08000183149 3

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 t	he Limited Liability Company is:	•	
CFC Syr	idicate, LLC		
If name unavaila	ole, the alternate name to be used in	n the state of Florida is:	
2. The name and	the Florida street address of the re	gistered agent and office are:	-
-	CFRA, LLC	ne)	08 JUL SECRE TALLAH
-	4221 W. Boy Scout Florida Street Address (P.O		31 M
	Tampa 33607	FL	AM ID: 01 OF STATE E. FLORIDA
•		FL State/Zip	DM -

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.

\$ 100.00

Filing Fee for Application

5 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CFC SYNDICATE, 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 THIRTY-FIRST DAY OF JULY, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CFC SYNDICATE, LLC" WAS FORMED ON THE EIGHTH DAY OF MAY, A.D. 2008.

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

080834340

Harriet Smith Windsor, Secretary of State

AUTRENTICATION: 6764327

DATE: 07-31-08