# M08000884176

•
(Requestor's Name)
(Address)
(Address)
(,
(City/Ctata/Tin/Dhaga #0
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Columbu Copies
Special Instructions to Filing Officer:

Office Use Only



500135528365

09/12/08--01038--003 \*\*130.00

2008 SEP 12 PH 12: 02 SECRETARY OF STATE TALLAHASSEE, FI DOIS.

D. BRUCE

SEP 15 2008

**EXAMINER** 

#### **COVER LETTER**

Registration Section
Division of Corporations

TO:

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:
ANDREW PINCUS
(Name of Person)  REGAL CAPITAL MANAGEMENT LLC REPRESENT LLC REPRESENT LLC REPRESENT LLC REPRESENT REPRESENT LLC REPRESENT REP
5850 CORAL RIDGE DR, SUITE 203 (Address)
CORAL SPRINGS, FL 33076 (City/State and Zip Code)
For further information concerning this matter, please call:
ANDREW PINCUS at (954) 755-9776  (Name of Person) (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}{25.00}\$ \text{ Filing Fee} \Bigsim \frac{1}{25.00}\$ \text{ Filing Fee} \& \Bigsim \frac{1}{25.00}\$ \text{ Filing Fee} \\ \text{ Filing Fee} \

### 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 FOREIC LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. REGAL CAPITAL MANAGEMENT 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 writte consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")
2. NEW JERSEY (Jurisdiction under the law of which threign limited liability company is organized)  3. 20-499098 (FEI number, if applicable)
4. June 5, 2006  (Date of Organization)  5. PERPETUAL By By (Duration: Year limited liability company All cent to exist or "perpetual")
6. (Date first transacted business in Florida if prior to registration.)
7. 5850 CORAL RIDGE DRIVE SUITE 2003 5
CORAL SPRINGS, FL 33076 ST R (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:
ANDREW PINCUS
5850 CORAL RIDGE DRIVE, SUITE 203
CORAL SPRINGS, FL 33076
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:
FINANCIAL PLANNING
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.)
ANDREW PINCUS
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 Dimined Button, Company to	
REGAL CAPITAL MANAGEMENT LLC	
If name unavailable, the alternate name to be used in the state of Florida is:	
SE TALL	
2. The name and the Florida street address of the registered agent and office are:  ARR ARR ARR ARR ARR ARR ARR ARR ARR A	
	Tel.
ANDREW LINUS (Name)  (Name)  (Name)  (Name)	U
5850 COPAL PIDGE DRIVE, SUITE 2037  Florida Street Address (P.O. Box NOT ACCEPTABLE)	
CURAL SPRINGS, FL 33076 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.

(Fignature)

1. The name of the Limited Liability Company is:

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

## STATE OF NEW JERSEY DEPARTMENT OF TREASURY LONG FORM STANDING WITH CHARTERED DOCUMENTS

#### REGAL CAPITAL MANAGEMENT LLC 0600271406

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on June 5, 2006.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

Andrew S. Pincus, Esq. 9 Concord Dr East Brunswick, NJ 08816

I further certify that as of the date of this certificate, no amend been filed.

IN TESTIMONY WHEREOF Stave Note thereunto set my hand and affirm of this of June, 2008

8Dall June

R. David Rousseau State Treasurer

Certification# 112200664

Verify this certificate at https://www1.state.nj.us/TYTR\_StandingCert/JSP/Verify\_Cert.jsp