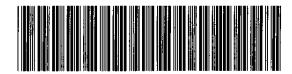
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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Pusings Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions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





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TO: Registration Section

#### **COVER LETTER**

Division of Corporations
SUBJECT: W.T. Phipps, TI Rucing Stable, 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:
Tush Cooper (Name of Person)
(Name of Person)
N/A
(Firm/Company)
7 Elizabeth Lane (Address)
(Address)
Suratogu Springs NY 12866 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
Tosh Cooper at (5/8') 583 - 6638  (Name of Person) (Area Code & Daytime Telephone Number)
MAILING ADDRESS: Division of Corporations  STREET ADDRESS: 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:  [V]\$125.00 Filing Fee \( \Bigcup \\$130.00 \) Filing Fee & \( \Bigcup \\$155.00 \) Filing Fee & \( \Bigcup \\$160.00 \) Filing Fee, Certificate Copy of Status & Certified Copy

### WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

We, the undersigned, do hereby certify that we are the Managers and/or Managing
Members of W.T. Phipps, II Racing Stable, LLC
(Name of Limited Liability Company)
a limited liability company duly organized and existing under the laws of
(State or Country of Organization)
(State of Country of Organization)
Because the name of this foreign limited liability company does not satisfy the
requirements of the s. 608.406, F.S., the limited liability company hereby adopts the
following name to transact business in the state of Florida:
(Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability Company, L.L.C., or LLC.)
Date: 12/20/08
Signature(s) of Manager(s) and/or Managing Member(s):
hT Phippe To

### 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:

	Limited Liability Company: must	/ LLC include "Limited Liability Company," "L.	C "or"[[C"]	-
(If name unavailable, enconsent of the managers Company," "L.L.C.," "L	or managing members adopting the	ourpose of transacting business in Florida a e alternate name. The alternate name must	nd attach a copy of the include "Limited Liabil	written lity
2. New York		3. <u>26 - 344/797</u> (FEI number, if app	P 11 S	-
company is organized				
4. 9/29/08	f Organization)	5. Perpetual  (Duration: Year limited liability of exist or "perpetual")	ompany will cease to	-
(Date e	1 Organization)	exist or "perpetual")	1 151	anni (Mari
6 11/1/08			LAR DEC	7 1
	(Date first transacted business i (See sections 608.501 & 608.502	in Florida, if prior to registration.) 2 F.S. to determine penalty liability)	ASS.	il Indute
7. <b>9</b> 700 SW	Kunner Highway		<b>2</b>	
Tadlandan	11, FL 34956 (Street Add		12: 2 S TAX L GRAI	STATE OF THE PARTY
	(Street Add	lress of Principal Office)	ਦੂਜ਼ ਯ	•
		managing members or managers are 700 Svv Kanner Highway Cadiantown , FL 34956	as follows:	
0. Attached is an origina		n 90 days old, duly authenticated by the offici ocopy is not acceptable. If the certificate is in submitted.)		ords in
10. Attached is an origina he jurisdiction under the l ranslation of the certificat	aw of which it is organized. (A phote e under oath of the translator must be	ocopy is not acceptable. If the certificate is in	a foreign language, a	
10. Attached is an origina he jurisdiction under the l ranslation of the certificat	aw of which it is organized. (A photo e under oath of the translator must be ss or purposes to be conducte	ocopy is not acceptable. If the certificate is in submitted.)	a foreign language, a	
10. Attached is an origina he jurisdiction under the landstation of the certificate. Nature of busine	aw of which it is organized. (A photo e under oath of the translator must be ss or purposes to be conducte	ocopy is not acceptable. If the certificate is in submitted.)	a foreign language, a	
10. Attached is an origina the jurisdiction under the laranslation of the certificate.	aw of which it is organized. (A phote e under oath of the translator must be ss or purposes to be conducted.)  Signature of a member or are (In accordance with section 608.408)	ed or promoted in Florida: Trail  authorized representative of a men  (3), F.S., the execution of this document constitu	a foreign language, a  Thorough b	
10. Attached is an origina he jurisdiction under the landstation of the certificate. Nature of busine	aw of which it is organized. (A phote e under oath of the translator must be ss or purposes to be conducted.)  Signature of a member or are (In accordance with section 608.408)	ed or promoted in Florida:	a foreign language, a  Thorough b	

#### 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:		
W.T. Phipps, II Racing Stable, LLC		-
If name unavailable, the alternate name to be used in the state of Florida is:		
Will Phippe Racing Stable, LCC		_
2. The name and the Florida street address of the registered agent and office are:		
MICHAEL RIVERS, UGR PAYSON PARK (Name)	08 DEC 3	Sherra Greensy Greensy
9700 SW KANNER HWY. Florida Street Address (P.O. Box NOT ACCEPTABLE)	海水 🛖	
INDIANTOWN FL 34956 City/State/Zip	9H 12: 25 F FLORIDA	CE ATT
Stry, State Stry		

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)

## State of New York Department of State } ss:

I hereby certify, that W.T. PHIPPS, II RACING STABLE, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 10/15/2008, and that the Limited Liability Company is existing so far as shown by the records of the Department.

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WITNESS my hand and the official seal of the Department of State at the City of Albany, this 17th day of December two thousand and eight.

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