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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

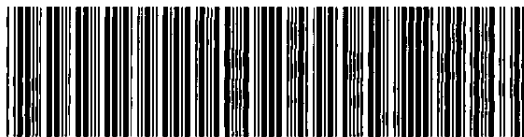
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SPEER & LONGCHAMPS, P.A.
- ATTORNEYS AT LAW -
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West Palm Beach

1800 Australian Avenue South, Suite 100
West Palm Beach, Florida 33409
(561) 655-9478
(561) 655-9479 (Fax)

Palm Beach Gardens

4400 Northcorp Parkway
Palm Beach Gardens, Florida 33410
(561) 655-9478
(561) 655-9479 (Fax)

Wellington

12230 Forest Hill Boulevard, Suite 110L
Wellington, Florida 33414
(561) 640-9244
(561) 655-9479 (Fax)

April 9, 2009

VIA U.S. MAIL ONLY

Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: Vieste Series LLC, a Delaware Limited Liability Company

Dear Sir or Madam:

Enclosed please find the following documents in connection with the above referenced limited liability company:

1. Cover letter to the Registration Section of the Division of Corporations;
2. Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida for Vieste Series LLC ("Application for Qualification");
3. Original Certificate of Existence for Vieste Series LLC; and
4. Check Number 6360 in the amount of \$125.00 made payable to the Florida Department of State, representing payment of the filing fee associated with the Application for Qualification.

If you need any additional information or have any further questions regarding this matter, please do not hesitate to contact me.

Sincerely,


Robert J. Longchamps

RJL/
Enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **VIESTE SERIES 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:

Robert J. Longchamps
(Name of Person)

Speer & Longchamps, P.A.
(Firm/Company)

1800 Australian Avenue South, Suite 100
(Address)

West Palm Beach, Florida 33409
(City/State and Zip Code)

For further information concerning this matter, please call:

Robert J. Longchamps at (**561**) **655-9478**
(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:

☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

**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. **VIESTE SERIES 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** 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. **February 10, 2009** 5. **Perpetual**
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")

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

7. **Principal Office: 6660 East Calumet Circle, Lake Worth, Florida 33467.**

John F. Robbert, Registered Agent, 29H Atlantic Avenue, Ocean View, Delaware 19970.
(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:

Manager: VIESTE PROPERTIES, LLC

c/o Elizabeth Susan Sherrill, Manager

6660 East Calumet Circle, Lake Worth, Florida 33467

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SECRETARY OF STATE

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: **Any purpose for which a limited liability company may be organized under Chapter 608, Florida Statutes**

Vieste Properties, LLC
By: *Elizabeth Susan Sherrill* (Its Manager)

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.)

Vieste Properties, LLC, by Elizabeth Susan Sherrill, Manager
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 Limited Liability Company is:

VIESTE SERIES 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:

Elizabeth Susan Sherrill

(Name)

6660 East Calumet Circle

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

Lake Worth, FL 33467

City/State/Zip

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TALLAHASSEE FLORIDA

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.

Elizabeth Susan Sherrill (Registered Agent)
(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, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "VIESTE SERIES 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 NINTH DAY OF MARCH, A.D. 2009.



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090248569

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


Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 7175676

DATE: 03-09-09