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SECRETARY OF STATE
SECRETARY OF STATE

J. BRYAN

MAY 2 9 2009

**EXAMINER** 

### COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Teater Atlantic Investments 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:
DAUIN M. BROWN
Name of Person
Name of Person  WARRANTY ATTLE SALUTIONS, LLC  Firm/Company  12331 TOWNE LAKE AR., SULTE THOUSE Address  FORT MYERS FL 33913  (City/State and Zin Code
Pittiv Company
Firm/Company  12331 TOWWE LAKE AR, SULTE 7 TO BE TO Address
Addiess . Test
FORT INVERS FL 33913  City/State and Zip Code
· City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Michael F. Conte at (203) 512-4524  Name of Person Area Code & Daytime Telephone Number
MAILING ADDRESS: STREET ADDRESS:
Division of Corporations Division of Corporations Registration Section Registration Section
P.O. Box 6327 Clifton Building
Fallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\sum

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

	I SECTION 608.503, FLORIDA ST IPANYTOTRANSACT BUSINESS I	•		TED TO REGISTE	R A FOREIGI
1. <u>GREATE</u> (Name of Foreign	Limited Liability Company; must	TWUES	TMENTS, Liability Company,	"L.L.C.," or "LLC.	")
(If name unavailable, ente	er alternate name adopted for the or managing members adopting t	purpose of transac	ting business in Florid	a and attach a copy	of the writter
company is organized)				岩	15 KM 58
4. 9/7/ (Date of	200 7 f Organization)	5. (Duration exist or	PERPETUM on: Year limited liabili "perpetual")	ty company without	ase to
6	(Date first transacted business (See sections 608.501 & 608.5	s in Florida, if prio 02 F.S. to determin	r to registration.) e penalty liability)	0.50	5 5 E
7. 27 OLL	D HAWLEYUILL	E ROAD	BETHEL	CT 0680	<u>)                                    </u>
<del></del>	(Street A	ddress of Principal	Office)		
8. If limited liability	company is a manager-mar	naged company,	check here		
	ual business addresses of the			are as follows:	
			•		THE
PILLHAFEL	F. COWTE, 1 THEL, CT 0680	MANNIKGIZIS	) 2104	THULTY	1 ther
10 KD, 36	THEL, C) DESU	) [			
		····			
the jurisdiction under the la	l certificate of existence, no more th law of which it is organized. (A ph e under oath of the translator must l	otocopy is not accep			
11. Nature of busine	ess or purposes to be conduc	ted or promoted	l in Florida: <u>R</u> E	AL ESTATI	<u> </u>
HOLATINGS					•
	M://		7		
	Signature of a member or				
	(In accordance with section 608.40 an affirmation under the penalties				
	Michael F	Conte	, MANAGER	Z	
	Typed or p	rinted name of s	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:	
GREATER ATLANTIC FNUESTMENTS, LLC	
If unavailable, the alternate to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office are:    DAUTA M. BROWN   HARY OF STATE OF	1 = n J

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)



## **NORTH CAROLINA** Department of The Secretary of State

#### CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

#### GREATER ATLANTIC INVESTMENTS, LLC

is a limited liability company duly formed under the laws of the State of North Carolina, having been formed on the 7th day of September, 2007, with its period of duration being Perpetual.

I FURTHER certify that the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act; and that the said limited liability company has not filed articles of dissolution as of this date of this certificate.

IN WITNESS WHEREOF, I have hereunto set



Secretary of State

Elaine I. Marshall

my hand and affixed my official seal at the City of Raleigh, this 22nd day of May, 2009.