M09000002701

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

Office Use Only



800157975688

07/13/09--01005--008 **125.00

SECRETARY OF STATE
DIVISION OF CORPORATIONS

T. HAMPTON
JUL 1 4 2009

EXAMINER

COVER LETTER

	stration Section sion of Corporations
SUBJECT: _	Griswold International UC
	Name of Limited Liability Company
	"Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of d check are submitted to register the above referenced foreign limited liability company to transact business in Florida
Please return a	all correspondence concerning this matter to the following:
	Patricia O'Malley
	Name of Person
	Oniswold Internation UC
	Firm/Company
	Ste 300, 717 Bethlehamlike
	Address
	Erdonhain RA 19038
	City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
	E-mail address: (to be used for future annual report notification)
For further inf	formation concerning this matter, please call:
	Patrice O'Nalley at (215) 402-0200 Name of Person Area Code & Daytime Telephone Number
	Name of Person Area Code & Daytime Telephone Number
Divis Regis P.O.	LING ADDRESS: sion of Corporations birration Section Box 6327 hassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is	a check for the following amount:
S 1	25.00 Filing Fee \$\int \text{\$130.00 Filing Fee & }\int \text{\$155.00 Filing Fee & }\int \text{\$\$160.00 Filing Fee, Certificate }\text{Certificate of Status}\$



Office of the General Counsel

July 7, 2009

Division of Corporations Registration Section PO Box 6327 Tallahassee FL 32314

Re: Griswold International LLC

Enclosed please find the above-noted entity's application for registration and filing fee. If you have any questions, I can be reached at 215-402-0200.

Thank you.

Sincerely,

Patricia O'Malley, Esquire General Counsel

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 LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	! A FO	OREIGN
Conserved International UC.		
1)	-
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Company," "L.L.C," "LLC.")	of the Liabi	written lity
2. (Jurisdiction under the law of which foreign limited liability 3. (FEI number, if applicable)		_
company is organized)		
4. O5/11/2009 (Date of Organization) 5. Quration: Year limited liability company will cear		_
(Date of Organization) (Duration: Year limited liability company will cea exist or "perpetual")	se to	
6. 07-01·09 +BD		_
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)		- -
7. Ste 300, 717 Bethleben PK.	U 60	SEC
Erdenheim PA 19038		記録
(Street Address of Principal Office)	₩	SAL
8. If limited liability company is a manager-managed company, check here	S	유민
	35	ATIC
9. The name and usual business addresses of the managing members or managers are as follows:	CT.	XS
Graham Weihmiller, President		_
Ste 300 717 Bethleham PK Endambein, PA 19038		_
Erdenheim, PA 19038		-
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign langual translation of the certificate under eath of the translator must be submitted.)		- cords in
11. Nature of business or purposes to be conducted or promoted in Florida: Franchisina	}—	_
of home care registries		_•
Oothelle		
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.)		
Potricia O'Malley, Es a. Typed or printed name of signee		
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.

If unavailable, the alternate to be used in the state of Florida is:		
The name	and the Florida street address of the registered agent and office are:	
	Chais topher Miller	
	(Name)	
	4851 NW 2032 Aue, Ste41	
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	
	Sunrise FL 33351	
	City/State/Zip	

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)

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)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "GRISWOLD INTERNATIONAL, 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 SECOND DAY OF JULY, A.D. 2009.

4683641 8300

090666754

AUTHENTY CATION: 7398011

DATE: 07-02-09

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