MU900000 2903

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B. KOHR JUL 29 2009 **EXAMINER**



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 22, 2009

DOREEN WALLACE CSC TALLAHASSEE, FL

SUBJECT: TEMPUS MINT, LLC Ref. Number: W09000033469



We have received your document for TEMPUS MINT, LLC and the authorization to debit your account in the amount of \$125.00. However, the document has not been filed and is being returned for the following:

As discussed, please list the street address of the company's principal office in Item 7.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr Regulatory Specialist II

Letter Number: 709A00025145



ACCOUNT NO. :

I2000000195

REFERENCE :

070348

AUTHORIZATION

COST LIMIT

ORDER DATE: July 17, 2009

ORDER TIME: 9:35 AM

ORDER NO. : 070348-010

CUSTOMER NO: 7196479

Please give original submission date as file date.

FOREIGN FILINGS

NAME: TEMPUS MINT, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

___ PLAIN STAMPED COPY

___ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Doreen Wallace -- EXT# 2928

EXAMINER:

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:

(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 (Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applicable) 4. 1/28/09 (Date of Organization) 5. perpetual (Duration: Year limited liability company with cease to exist or "perpetual")). Te	empus Mint, LIC
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 (Inristliction under the law of which foreign limited liability company is organized) 4. 1/28/09 (Date of Organization) 5. Descriptual (Duration: Year limited liability company will be a sections 608.501 & 608.502 F.S. to determine penalty liability) 7. 101 South Rohertson Boulevard Los Angeles. CA 90048 (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: Stuart Williams Tempus Pax, LLC 420 Boanoke Road, Westfield, NJ 07090 10. Attacked is an original certificate orexistence, 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 ranslation of the certificate under each of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: To engage in any lawful act or activity for which limited liability companies may be formed. Signature of a member or an authorized representative of a member. (In accordance with sertion 608.6083), F.S., the execution of this document constitutes an affirmation under the penalties of principal that the facts stated herein are true.)	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
4. 1/28/09 (Date of Organization) 5. Description: Year limited liability company with case 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. 101 South Robertson Boulevard Los Angeles. CA 90048 (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: Stuart Williams Tempus Pax, LLC 420 Roanoke Road, Westfield, NJ 07090 10. Attacked 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 ranslation of the certificate under each of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: To engage in any lawful act or activity for which limited liability companies may be formed. 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 nuder the penaltics of perjury that the facts stated herein are true;	consent	of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability
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(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.)		36
Stuart Williams		(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.)
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:	
Tempus Mint, LIC		
If name unavailable, the alter	nate name to be used in the state of I	Florida is:
Tempus Pax Concierge	, LLC	
2. The name and the Florida	street address of the registered agent	and office are:
Corporation	n Service Company	
	(Name)	
1201 Hays		
. 1	lorida Street Address (P.O. Box <u>NOT</u> ACC	EPTABLE)
Tallahasse	FL_32301	
***************************************	City/State/Zip	
liability company at the place agent and agree to act in this relating to the proper and con	red agent and to accept service of prodesignated in this certificate, I hereby capacity. I further agree to comply with plete performance of my duties, and I egistered agent as provided for in Chanpany	paccept the appointment as registered ith the provisions of all statutes I am familiar with and accept the
(Signatu	;)	
Doreen Wallace ssistant Vice President	\$ 100.00 Filing Fee for Appl \$ 25.00 Designation of Reg \$ 30.00 Certified Copy (op \$ 5.00 Certificate of Statu	gistered Agent tional)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "TEMPUS MINT, 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 SEVENTEENTH DAY OF JULY, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TEMPUS MINT, LLC" WAS FORMED ON THE TWENTY-EIGHTH DAY OF JANUARY, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

4649369 8300

090708737

AUTHENT (CATION: 7425333

DATE: 07-17-09

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