# MOADOODD 2917

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	<u> </u>
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	,

Office Use Only



500158665495

07/31/09--01022--020 \*\*160.00

FILED

09 JUL 31 PH 12: 50

SECRETARY OF STATE
TALL A HASSEE OF STATE
TALL A HASSEE

D. BRUCE

AUG 0 3 2009

**EXAMINER** 

#### **COVER LETTER**

SUBJECT:		Palm Equity LLC	
		lame of Limited Liability Company	
Existence, and che	ck are submitted to register the	iability Company for Authorization to Transact Business in above referenced foreign limited liability company to trans	
Please return all co	rrespondence concerning this	matter to the following:	
		Grant E. Mashek	
		Name of Person	
		Palm Equity LLC	
<del></del>		Pirm/Company	
	12	25 Worth Avenue, Suite 222	
•		Address	
	P:	alm Beach, FL 33480-4430	99 TAL SE
	**************************************	City/State and Zip Code	
		machal Analmacuity com	O9 JUL 31 SECRETAR'
	E-mail address	mashek@palmequity.com (to be used for future annual report notification)	· · · · · · · · · · · · · · · · · · ·
For further informa	ation concerning this matter, pl	ease call:	IUL 31 PH IZ: 50 RETARY OF STATI AHASSEE, FLORI
			STA C
<u></u>	Missy Zentz	at ( 561 ) 655-5118	
	Name of Person	Area Code & Daytime Telephone Number	
Division o Registrati P.O. Box	G ADDRESS: of Corporations on Section 6327 ee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a ch	eck for the following amo	ount:	
<b>S</b> 125.00	Filing Fee \$130.00 Fil	· — · — ·	g Fee, Certificate & Certified Copy

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	Palm Equity LLC  (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
col	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the usent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liabil ompany," "L.L.C," "LLC.")	
2.	Delaware 3 38-3788084	
	Delaware 3. 38-3788084  (Jurisdiction under the law of which foreign limited liability company is organized)  (FEI number, if applicable)	
4.	06/05/08 5. Perpetual	
т.	(Date of Organization)  (Date of Organization)  (Duration: Year limited liability company will cease to exist or "perpetual")	
6.	08/01/2009	
υ,	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7.	125 Worth Avenue Suite 222	
	Palm Beach, FL 33480-4430	1
	(Street Address of Principal Office)	
8.	if finited habitity company is a manager-managed company, check here $\sqrt{}$	ED
9.	The name and usual business addresses of the managing members or managers are as follows:	
	Grant E. Mashek, Manager	
	125 Worth Avenue Suite 222	
	Palm Beach, FL 33480-4430	
the	t. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of receiptricition under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a instation of the certificate under oath of the translator must be submitted.)	ords in
11	. Nature of business or purposes to be conducted or promoted in florida: Consulting	
	// , $//$	
		ī
	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.)	
	Grant E. Mashek	
	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:		
	Palm Equity LLC	_	
lf unavailable, t	he alternate to be used in the state of Florida is:		
2. The name an	d the Florida street address of the registered agent and office are:	-	
	CSC Corporation		
	(Name)		
	1201 Hayes Street	09	
	Florida Street Address (P.O. Box NOT ACCEPTABLE)		Ţ
	Tallahassee, Fig. 32301	3 r	1
	City/State/Zip	SO KE	1
liability company agent and agree relating to the pr	ned as registered agent and to accept service of process for the above stated limited of at the place designated in this certificate, I hereby accept the appointment as regist to act in this capacity. I further agree to comply with the provisions of all statutes to performance of my duties, and I am familiar with and accept the position as registered agent as provided for in Chapter 608, Florida Statutes.	.56	<b>ン</b>

\$ 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 "PALM EQUITY 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 TWENTY-SEVENTH DAY OF JULY, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

O9 JUL 31 PH 12: 56
SECRETARY OF STATE

4557435 8300

090730693

AUTHEN

Jeffrey W. Bullock, Secretary of State

AUTHENT\(CATION: 7441730\)

DATE: 07-27-09

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