(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
;
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

EXAMINER

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COVER LETTER

то:	Registration Section Division of Corporations	
SUBJE	CT: <u>AMERICAN</u>	Name of Limited Liability Company
		mited Liability Company for Authorization to Transact Business in Florida," Certificate of ister the above referenced foreign limited liability company to transact business in Florida
Please	return all correspondence concerni	ng this matter to the following:
	Mark Was	Name of Person
		Name of Person
	AMEIZICAN	A 71AN71C 11C Firm/Company
		Firm/Company
	3711 STAR	RS Centre DRIVE Address
		Address
	Canfield	OH 4496. City/State and Zip Code
	<u> trustmarka</u> E-mail	address: (to be used for future annual report notification)
For fur	ther information concerning this n	natter, please call:
	Marie Walang	c at (330) 327-1591.
	Name of Perso	at (330) 327-1591. Area Code & Daytime Telephone Number
	MAILING ADDRESS:	STREET ADDRESS:
	Division of Corporations Registration Section	Division of Corporations Registration Section
	P.O. Box 6327	Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301
		Tananassee, TE 32501
Enclo	osed is a check for the follow	ing amount:
	—	30.00 Filing Fee & \$\int\\$155.00 Filing Fee & \$\int\\$\$160.00 Filing Fee, Certified Conv

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: AMERICAN ATLANTIC 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.") (Jurisdiction under the law of which foreign limited liability company is organized)

(Jurisdiction under the law of which foreign limited liability company is organized)

(FEI number, if applicable) 5. Perpetual

(Duration: Year limited liability company will cease to 4. 12 June 2009 (Date of Organization) (Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability) 7. 3711 STARRS Centre Drive 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: 3711 STARRS CentRE DRIVE CANFIELD OH 4496. 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.) Estate Plan or administrative reviews . Annuities LIFE 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.) MARK WAGNER

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:			
AMERICAN ATLANTIC LLC.			
If unavailable, the alternate to be used in the state of Florida is:			
AMERICAN LEGACY			
2. The name and the Florida street address of the registered agent and office are:			
Stacey M. Posek (Name)			
Florida Street Address (P.O. Box NOT ACCEPTABLE)			
Cope Coral FL 33990 City/State/Zip			

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.

Stacy M. Paseko (Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Sccretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, AMERICAN ATLANTIC, LLC., as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since June 11, 2009, and is in good standing in this state.

Electronic Certificate
Certificate Number: C20090612-1746
You may verify this electronic certificate
online at http://www.nvsos.gov/

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on June 12, 2009.

ROSS MILLER Secretary of State