

M09000003200

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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09 AUG 14 PM 1:49

STATE OF FLORIDA
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED

09 AUG 14 PM 4:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. KOHR

AUG 18 2009

EXAMINER



CORPORATION SERVICE COMPANY

File 2nd

ACCOUNT NO. : I20000000195

REFERENCE : 096652 4304954

AUTHORIZATION :

COST LIMIT : \$125.00

ORDER DATE : August 14, 2009

ORDER TIME : 1:24 PM

ORDER NO. : 096652-015

CUSTOMER NO: 4304954

RESUBMIT

Please give original
submission date as file date.

FILED
09 AUG 14 PM 4:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FOREIGN FILINGS

NAME: XCOVERY LLC

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

RECEIVED
09 AUG 18 AM 10:47
DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

CONTACT PERSON: Matthew Young -- EXT# 2962

EXAMINER: _____



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 17, 2009

MATTHEW YOUNG
CSC
TALLAHASSEE, FL

SUBJECT: XCOVERY LLC
Ref. Number: W09000037114

RESUBMIT

Please give original
submission date as file date.

FILED
09 AUG 14 PM 4:25
TALLAHASSEE, FLORIDA

We have received your document for XCOVERY 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, the list of MANAGERS was not included.

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: 809A00027896

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. XCoverly 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.")

2. Delaware

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

3. 27-0730805

(FEI number, if applicable)

4. 08/11/2009

(Date of Organization)

5. Perpetual

(Duration: Year limited liability company will cease 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. 501 S. Flagler Drive, Suite 501

West Palm Beach, FL 33401

(Street Address of Principal Office)

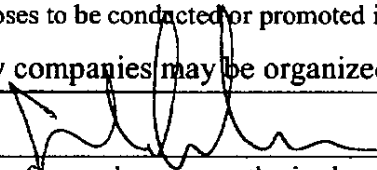
8. If limited liability company is a manager-managed company, check here ☒

9. The name and usual business addresses of the managing members or managers are as follows:

See attached list.

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.)

11. Nature of business or purposes to be conducted or promoted in Florida: Any lawful act or activity
for which limited liability companies may be organized under Florida law.


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.)

Sheridan G. Snyder

Typed or printed name of signee

FILED
09 AUG 14 PM 4:25
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

XCovery LLC

Attachment to Application by Foreign Limited Liability Company
for Authorization to Transact Business in Florida

9. The name and business address of the managers of the company.

Name	Address
Sheridan G. Snyder	501 S. Flagler Drive, Suite 501 West Palm Beach, FL 33401
Chris Liang	501 S. Flagler Drive, Suite 501 West Palm Beach, FL 33401

**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:

XCover LLC

If name unavailable, the alternate name to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:

Corporation Service Company

(Name)

1201 Hays Street

Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Tallahassee

FL 32301

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.

Corporation Service Company

Matthew Young
as its agent

BY: 

(Signature)

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

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "XCOVERY 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 TWELFTH DAY OF AUGUST, A.D. 2009.

4719700 8300

090771447

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




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 7472350

DATE: 08-12-09