MA 000003435

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

Office Use Only



300159050263

08/31/09--01026--019 **125.00



C. LEWISSEP 1 2009

EXAMINER



August 26, 2009

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: Hanover Settlement & Escrow LLC

Dear Filing Officer:

Please file the attached Application for Authority for the referenced company. Enclosed please find a check for the requisite fees. Please return evidence of filing to my attention via regular mail.

If for any reason the enclosed cannot be filed upon receipt, please contact the undersigned immediately at (800) 862-5438. Thank you very much for your assistance.

Very truly yours,

Tanya Diet/ridh

Senior Corporate Specialist

Encl.



COVER LETTER

| TO: Registration Section Division of Corporations | |
|--|--|
| SUBJECT: Hanover Settlement & Escrow LLC | |
| | mited Liability Company) |
| | iability Company for Authorization to Transact Business in submitted to register the above referenced foreign limited. |
| Please return all correspondence concerning this | matter to the following: |
| Tanya Dietrich | • |
| (1) | Name of Person) |
| National Corporate Services, LLC | |
| (F | Cirm/Company) |
| 16055 Space Center Blvd., Ste. 235 | |
| | (Address) |
| Houston, TX 77062 | |
| (City/S | State and Zip Code) |
| For further information concerning this matter, p | lease call: |
| Tanya Dietrich | at (800) 862-5438 |
| (Name of Person) | (Area Code & Daytime Telephone Number) |
| MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 |
| Enclosed is a check for the following amount: []\$125.00 Filing Fee \$\int \text{\$130.00 Filing Fee & Certificate of the following amount:} | |

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:

| LIMITED LIABILITY COMPANY TO TRANSACT BUSIN. | ESS IN THE STATE OF PLORIDA: |
|---|---|
| 1. Hanover Settlement & Escrow LLC | |
| (Name of Foreign Limited Liability Company | ; must include "Limited Liability Company," "L.L.C.," or "LLC.") |
| | |
| | or the purpose of transacting business in Florida and attach a copy of the written |
| consent of the managers or managing members adopt Company," "L.L.C.," "LLC.") | ting the alternate name. The alternate name must include "Limited Liability |
| Company, E.E.C., EEC.) | |
| 2. Pennsylvania | 3. 26-371723 |
| (Jurisdiction under the law of which foreign limite company is organized) | d liability (FEI number, if applicable) |
| . , | Dometrial |
| 4. 11/25/08 (Date of Organization) | 5. Perpetual (Duration: Year limited liability company will cease to |
| (Dute of Organization) | exist or "perpetual") |
| 6. Upon filing | |
| (Date first transacted bus | siness in Florida, if prior to registration.) |
| (See sections 608.501 & 6 | 508.502 F.S. to determine penalty liability) |
| 7. 300 Frederick St., Ste. 4 | |
| | |
| Hanover, PA 17331 | eet Address of Principal Office) |
| (Sire | et Address of Principal Office) |
| 8. If limited liability company is a manager- | -managed company, check here |
| | <u> </u> |
| 9. The name and usual business addresses o | of the managing members or managers are as follows: |
| David R. Breschi, 300 Frederick Street, Ste. | 4 Hanover PA 17331 |
| David 14. Dieseill, 000 Frederick Officet, 01c. | 4, Hallovel, 17, 17301 |
| Steven J. Pitchersky, 300 Frederick Street, | Ste. 4, Hanover, PA 17331 |
| | |
| | |
| | |
| | ore than 90 days old, duly authenticated by the official having custody of records in |
| translation of the certificate under eath of the translation | A photocopy is not acceptable. If the certificate is in a foreign language, a |
| was ballon of the confinence three control the translation in | nuscoe suorinucci.) |
| 11. Nature of business or purposes to be con | nducted or promoted in Florida: |
| | |
| Real Estate Title and Escrow Agency | 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| DZev | 1. Scerch- |
| Stenature of a member | r or an authorized representative of a member. |
| (In accordance with section 6 | 08.408(3), F.S., the execution of this document constitutes |
| • | alties of perjury that the facts stated herein are true.) |
| David R. Breschi, Memb | Der Turi |
| Typed o | 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.

| | f the Limited Liability(nent & Escrow LLC | Company is. | |
|-----------------|---|--|---|
| If name unavail | lable, the alternate name | e to be used in the state of Florida is: | |
| 2. The name ar | | ress of the registered agent and office are: | 2009 AUG 3 |
| | NRAI Services, Inc. | () [] | - 김 등 - |
| | 2731 Executive Park Dr Florida Stree | (Name) ive, Suite 4 et Address (P.O. Box NOT ACCEPTABLE) | 31 PH 1: 09 TARY OF STATE ASSEE, FLORID |
| | Weston | FL 33331 City/State/Zip | 77.05 77.05 7.05 |

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. NRAI Services, Inc.

(Signature)
Tanya Dietrich, Asst. Secretary

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

AUGUST 25, 2009

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

HANOVER SETTLEMENT & ESCROW LLC

is duly organized as a Pennsylvania Limited Liability Company under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Secretary of the Commonwealth

Certification Number: 8269179-1

Verify this certificate online at http://www.corporations.state.pa.us/corp/soskb/verify.asp