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



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SECRETARY OF STATE

T. CLINE

SEP 1 1 2009

EXAMINER

September 4, 2009

Registration Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

RE: NORTH LUCIE, LLC

To Whom It May Concern:

Enclosed with this letter please find the following:

- 1. An original and one copy of the Application by a Foreign Limited Liability Company for Authorization to Transact Business in Florida for the above referenced entity;
- 2. A check for \$155.00, made out to the Florida Department of State; and
- 3. A pre-addressed return envelope.

Please file the Application by a Foreign Limited Liability Company for Authorization to Transact Business in Florida and return a filed copy to me in the enclosed envelope. If you have any questions or concerns regarding this filing please call me at 800-266-1296.

Sincerely yours,

Amy Hunter Organizer

COVER LETTER

| | tration Section ion of Corporations | | , |
|---|--|--|--|
| SUBJECT: | NORTH LUCIE, LLC | | |
| 200000 | | ted Liability Company) | ************************************** |
| Florida," Cer | "Application by Foreign Limited Lial tificate of Existence, and check are supany to transact business in Florida | | |
| Please return | all correspondence concerning this m | atter to the following: | |
| | AMY HUNTER | | , mrt 123 |
| | (Nai | me of Person) | JES SEP |
| | ACORN CORPORATE SERVIC | ES | 555 |
| | (Fire | m/Company) | AHII: 03 |
| | 3225 MCLEOD DRIVE #110 |) | |
| | (| (Address) | |
| | LAS VEGAS, NV 89121 | | |
| | (City/Sta | te and Zip Code) | |
| For further in | formation concerning this matter, plea | ase call: | |
| AMY | HUNTER | at (800) 266-1296 | |
| | (Name of Person) | (Area Code & Daytime Telepho | ne Number) |
| Divisi P.O. I | LING ADDRESS: fon of Corporations Box 6327 nassee, FL 32314 | STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 | |
| Enclosed is a check for the following amount: \$\Bigsiz \frac{1}{2}\$125.00 Filing Fee 155.00 Filing Fee & Bigsize | | | |

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:

| 1. | NORTH LUCIE, LLC | | | | |
|-----|--|---|--|--|--|
| | (Name of Foreign Limited Liability Company) | | | | |
| 2 | NEVADA 3. | | | | |
| ۷. | (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) | | | | |
| 4. | | | | | |
| | (Date of Organization) (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. | 3225 MCLEOD DRIVE #100 | 17 | | | |
| | LAS VEGAS, NV 89121 | Application. | | | |
| | (Street Address of Principal Office) | - 10 5 | | | |
| 8. | If limited liability company is a manager-managed company, check here | 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - | | | |
| 9. | The name and usual business addresses of the managing members or managers are as follows: | | | | |
| | A.T. MATHIS | | | | |
| | 3225 MCLEOD DRIVE #100 | | | | |
| | LAS VEGAS, NV 89121 | | | | |
| the |). Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of recone jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a inslation of the certificate under oath of the translator must be submitted.) | ds in | | | |
| 11 | 1. Nature of business or purposes to be conducted or promoted in Florida: ALL LAWFUL BUSINESS | | | | |
| • | ACTIVITY. | | | | |
| | | | | | |
| | 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.) A.T. MATHIS | | | | |

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 | of the Limited Liability Company is: | | |
|----------------|---|-------------|---------------------------------|
| NORTH LL | ICIE, LLC | | |
| 2. The name a | nd the Florida street address of the registered agent and office are: | 2009 Sea | |
| | MANAGEMENT R US, INC. | 2009 SEP | B & |
| | (Name) | ASSI A | Canada S Canada Canada |
| | 123 N. CONGRESS AVE #273 | AM III: | Second Second Second |
| | Florida Street Address (P.O. Box NOT ACCEPTABLE) | TATE OS | |
| | BOYNTON BEACH FL 33426 | 150 CJ | |
| | 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.

(Signature)

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

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary 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, **NORTH LUCIE**, **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 October 26, 2006, and is in good standing in this state.

Electronic Certificate
Certificate Number: C20090904-1326
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 September 4, 2009.

ROSS MILLER Secretary of State