Division of Corporations **Electronic Filing Cover Sheet** 

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

Sitrick Brincko Group, LLC

Certificate of Status	0
Certified Copy	0
Page Count	. 05
Estimated Charge	\$125.00

NOV 13 2009

**EXAMINER** 

#### **COVER LETTER**

	Registration Section Division of Corporations	
SUBJEC	Γ:	Sitrick Brincko Group, LLC
		Name of Limited Liability Company
The enclose Existence,	sed "Application by Poreig , and check are submitted to	n Limited Liability Company for Authorization to Transact Business in Florida," Certificate of register the above referenced foreign limited liability company to transact business in Florida
Please reta	um all correspondence con-	cerning this matter to the following:
		Regina Bramas
		Name of Person
		O'Melveny & Myers LLP
	<i>,,,</i> ,	Firm/Company
		610 Newport Center Drive, Suite 1700
		Address
		Newport Beach, CA 92660 7
For further	E-r r information concerning th	City/State and Zip Code  City/State and Zip Code  Common C
	Regina B	raman at ( 949 ) 823-5906
	Name of F	erson Area Code & Daytime Telephone Number
R P	MAILING ADDRESS; Division of Corporations registration Section O. Box 6327 allahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassoe, FL 32301
Enclosed	l is a check for the foll	owing amount;
	\$125.00 Filing Foe	\$130.00 Filing Fee & S155.00 Filing Fee & S160.00 Filing Fee, Certificate Certificate of Status & Certified Copy of Status & Certified Copy

NB1:784770

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

IN COMPLIANCE WITH SECTION 608.508, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Sitrick Brincko Group, 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.") 27-1263368 Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 11/12/09 Perpetual (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") 6. Upon qualification (Date first transacted business in Florids, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability) 7. 17101 Armstrong Avenue, Irvine, CA 92614 (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: 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 principlication under the law of which it is organized. (A phonocopy is not acceptable. If the certificate is in a fireign 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: \_\_\_\_\_ This LLC may engage in or transact any or all lawful activities or principes permitted inder the laws of the United States and the State of Florida. 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.) Michael S. Sitrick, Authorized Person

Typed or printed name of signee

<u>NB1:784770</u>

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, PLORIDA 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:
Sitrick Brincke Group, LLC
If unavailable, the alternate to be used in the state of Florida is:
2. The name and the Florida street address of the registered agent and office are:
C T Corporation System
(Name)
1200 South Pine Island Road
Florida Street Address (P.O. Box NOT ACCEPTABLE)
Plantation FL 33324
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 register 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 regist relative vicinity for in Chapter 608, Florida Statutes.  By:  Assistant Secretary

\$ 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 I

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SITRICK BRINCKO GROUP, 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 NOVEMBER, A.D. 2009.

4752178 8300

091009479

DATE: 11-12-09

AUTHENTICATION: 7635419

You may varify this certificate online at corp. deleware.gov/authver.shtml