11/09000004584

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

Office Use Only



800162382738

11/06/09--01032--009 **130.00

W19-49523

J. BRYAN

NOV 2 0 2009

EYAMINER

COVER LETTER

| TO: Registration Section Division of Corporations |
|---|
| SUBJECT: ACRA LLC |
| Name of Limited Liability Company |
| The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida |
| Please return all correspondence concerning this matter to the following: |
| Marsha Romero Name of Person |
| K&L Coates Firm/Company |
| 200 S. Biscayne Blvd. # 3900 |
| Miami, Fl 33131 City/State and Zip Code |
| marsha. romero & Klaates. Com E-mail address: (to be used for future and ual report notification) |
| For further information concerning this matter, please call: |
| Marsha Romer at (305) 539-3358 Name of Person Area Code & Daytime Telephone Number |
| MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301 |
| Enclosed is a check for the following amount: |
| \$125.00 Filing Fee \$\sum \frac{1}{30.00}\$ Filing Fee \$\times \text{\$155.00}\$ Filing Fee \$\times \text{\$160.00}\$ Filing Fee, Certificate Copy of Status & Certified Copy |



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 9, 2009

MARSHA ROMERO K & L GATES 200 S. BISCAYNE BLVD. #3900 MIAMI, FL 33131

SUBJECT: ACRA LLC

Ref. Number: W09000049523

We have received your document for ACRA LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a foreign limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations. Therefore, the limited liability company must select an alternate name for use in the state of Florida. Also, please note that adding "of Florida" or "Florida" to the end of the name is not acceptable.

Please insert the alternate name in the space provided on the application form. You must also attach a copy of the written consent of the managers or managing members adopting the alternate name for Florida. For your convenience, we are enclosing a fill-in-the-blank form for you to complete and return to our office for processing.

The alternate name must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The word "Limited"may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable limited liability company suffixes in Florida: "Limited Company," "L.C.," and "LC."

The document number of the name conflict is #671870, ACRA CORPORATION.

The document must contain the name, title, and business address of each managing member or manager who will manage the foreign limited liability company in the state of Florida. Please insert "MGRM" in the title portion for each managing member and "MGR" in the title portion for each manager.

If you have any questions concerning the filing of your document, please call

(850) 245-6043.

Joey Bryan Regulatory Specialist II

Letter Number: 509A00035131

WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

| We, the undersigned, do hereby certify th | at we are the Managers and/or Managing |
|---|---|
| Members of ACRA, IIC | ited Liability Company) |
| (Name of Lim | ited Liability Company) |
| a limited liability company duly organized | d and existing under the laws of |
| DELAWARE | <u></u> . |
| (State or Country of Organization) | |
| Because the name of this foreign limited l | iability company does not satisfy the |
| requirements of the s. 608.406, F.S., the li | imited liability company hereby adopts the |
| following name to transact business in the | state of Florida: |
| (Name to be used by limited liability company in Florid Company, L.L.C., or LLC.) | SERVICES OF FLORIDA, IIC a. NOTE: Name must end with Limited Liability |
| Date: 11/13/09 | |
| Signature(s) of Manager(s) and/or Managi | ing Member(s): |
| Alexander | Camjo |
| | <i></i> |
| 1 | |
| | |
| | |
| | |
| | |
| · | |
| | |

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 | ACRA, | LLC |
|---------|--|--|
| | ACRA, (Name of Foreign Limited Liability Company; must include | "Limited Liability Company," "L.L.C.," or "LLC.") |
| | ACDA CEDUTATE OF ELABIDA | |
| (If na | ame unavailable, enter alternate name adopted for the purpose | LC of transacting business in Florida and attach a copy of the written |
| conse | ent of the managers or managing members adopting the alterna | te name. The alternate name must include "Limited Liability |
| Comp | pany," "L.L.C," "LLC.") | |
| 2 | Delaware 2 | 30-0564241 |
| (Ju | Delaware urisdiction under the law of which foreign limited liability 3. | (FEI number, if applicable) |
| con | mpany is organized) | |
| 4 | 05/05/09 5. (Date of Organization) | Perpetual |
| · | (Date of Organization) | Perpetual (Duration: Year limited liability company will cease to |
| | | exist or "perpetual") |
| 6. | AE /05 /00 | |
| ٠ | 05/05/09 (Date first transacted business in Florid | a, if prior to registration.) |
| | (See sections 608.501 & 608.502 F.S. to | determine penalty liability) |
| 7. 20 | 00 S. Biscayne Blvd., Suite 3900 | |
| | | |
| M | Miami, Florida 33131 | |
| | (Street Address of F | rincipal Office) |
| | | |
| g. It | limited liability company is a manager-managed con | mpany, check here |
| า าาเ | ha mana and amad basiness address - City | |
| | he name and usual business addresses of the managii Alexander Carrizo | ng members or managers are as follows: |
| | 200 S. Biscayne Blvd., Suite 3900 | |
| = | | |
| M | Miami, Florida 33131 | |
| | · · · · · · · · · · · · · · · · · · · | |
| | · | |
| | | |
| 0. At | ttached is an original certificate of existence, no more than 90 days | old, duly authenticated by the official having custody of records in |
| | isdiction under the law of which it is organized. (A photocopy is r | |
| anslati | tion of the certificate under oath of the translator must be submitted | 1) |
| | | - |
| 1. N | Nature of business or purposes to be conducted or pro | moted in Florida: Telecommunication |
| | | |
| | Service Prov | ider |
| | ΔM^{2} | / |
| | | |
| | Signature of a member or an author | |
| | (In accordance with section 608.408(3)/F.S/; the an affirmation under the penalties of perjury the | |
| | Alexander | |
| | Typed or printed nar | |
| | i yped of printed nan | ie or signee |

1111

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: |
|--|
| ACRA, LLC |
| If unavailable, the alternate to be used in the state of Florida is: |
| ACRACSERVICES OF FLORIDA, LLC |
| 2. The name and the Florida street address of the registered agent and office are: |
| Richard L. Winston, Esq. |
| (Name) |
| 200 S. Biscayne Blvd., Suite 3900 |
| Florida Street Address (P.O. Box NOT ACCEPTABLE) |
| Miami, 3 <u>β1</u> 31 |
| 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 (optional)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "ACRA 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 THIRD DAY OF NOVEMBER, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ACRA LLC" WAS FORMED ON THE FIFTH DAY OF MAY, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

4683937 8300

090984764

Jeffrey W. Bullock, Secretary of State

AUTHENT CATION: 7618024

DATE: 11-03-09

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