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Special Instructions to	Filing Officer:		
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SECRETARY OF STATE

J. BRYAN

DEC -8 2009

EXAMINER

COVER LETTER

SUBJECT:	F	FL Baker LLC	
SUBJECT:		ne of Limited Liability Company	
			ransact Business in Florida," Certificate of ity company to transact business in Florida
Please return all	correspondence concerning this ma	tter to the following:	
	ı	Lynn E. Schwartz, Esq.	
		Name of Person	90 8
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		Lemery Greisler LLC	三 寛 ら 三
		Firm/Company	ARYY SSS
	60.1	Railroad Place, Suite 502	PILEU 09 DEC -7 PK 3: 20 SECRETARY OF STATE SECRETARY OF FILORIE
	001	Address	
			20 REF
	Sar	atoga Springs, NY 12866	
		City/State and Zip Code	
	Lech	wartz@lemerygreisler.com	
-		o be used for future annual report no	tification)
For further inform	nation concerning this matter, plea	se call:	
		540	504.0000
	Lynn Schwartz Name of Person	at (518) Area Code & Daytime Telephore	581-8800
	Name of Person	Area Code & Daytille Telephol	ie i vuinoei
	NG ADDRESS:	STREET ADDRESS: Division of Corporations	
	of Corporations tion Section	Registration Section	
P.O. Bo		Clifton Building	
Tallahas	see, FL 32314	2661 Executive Center Circle	
		Tallahassee, FL 32301	
Enclosed is a	check for the following amou	nt:	
\$125	00 Filing Fee \$130.00 Filing Certificate of		\$160.00 Filing Fee, Certificate of Status & Certified Copy

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

We, the undersigned, do hereby certify that w	e are the Managers and/or Ma	anaging
Members of FL Baker LLC		
(Name of Limited I	.iability Company)	,
a limited liability company duly organized an	d existing under the laws of	
New York		
(State or Country of Organization)	- '	
Because the name of this foreign limited liabi	lity company does not satisfy	the
requirements of the s. 608.406, F.S., the limit	ed liability company hereby a	dopts the
following name to transact business in the sta	te of Florida:	
RB Cape Properties		
(Name to be used by limited liability company in Florida. N Company, L.L.C., or LLC.)	OTE: Name must end with Limited Lia	bility
Date:		
Signature(s) of Manager(s) and/or Managing	Member(s):	-
Long Sola	Ross D. Baker	SEC SEC
Donatt Est	Donald Baker	E PAR
		SE P
		FEO. 3:
		— RA 20
		<u></u>

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:

١.	FL Baker LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")			
	RB Cape Prope			
co	Fname unavailable, enter alternate name adopted for the purpose on sent of the managers or managing members adopting the alternation parameters, "L.L.C," "LLC.")	of transacting business in Florida and attach a copy of the write	tter	
2.	New York (Jurisdiction under the law of which foreign limited liability	27-1191110 (FEI number, if applicable)		
	(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)		
4.	October 26, 2009 5.	Perpetual (Duration: Year limited liability company will cease to		
	(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")		
6.	N/A			
	(Date first transacted business in Florid (See sections 608.501 & 608.502 F.S. to	a, if prior to registration.) determine penalty liability)		
7.	138 County Road 338	99 SE		
	Schuylerville, New York 12071	DEC CARE LAR	Π	
	(Street Address of I			
	If limited liability company is a manager-managed co	mpany, check here	T	
9.	The name and usual business addresses of the managi	mpany, check here FF ST 3: 20		
	Ross Baker - 138 County Road 338, Schuylervil	le, New York 12071		
	Donald Baker - 1105 SE 20th Avenue, Cape Co	ral, FL 33990		
the	Attached is an original certificate of existence, no more than 90 days jurisdiction under the law of which it is organized. (A photocopy is inslation of the certificate under eath of the translator must be submitted.	not acceptable. If the certificate is in a foreign language, a	sin	
11	. Nature of business or purposes to be conducted or pr	romoted in Florida:		
	any lawful business or activity t	under the law of this state		
	Law Sal			
	Signature of a member or an author (In accordance with section 608.408(3), F.S., an affirmation under the penalties of perjury	the execution of this document constitutes		
	Ross D.			
	Typed or printed na	ame 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 the Limited Liability Company is:	
FL Baker LLC	
If unavailable, the alternate to be used in the state of Florida is:	
RB Cape Properties LLC	
2. The name and the Florida street address of the registered agent and office are:	9 DEC SECRET
Donald Baker	ETAR HASS
(Name)	SEE: PA
1105 SE 20th Avenue	ب بي ٽ
Florida Street Address (P.O. Box NOT ACCEPTABLE)	3: 20 STATE FLORIDA
Cape Coral, ₱Ļ 33990	, _
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)

State of New York Department of State } ss:

I hereby certify, that FL BAKER LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 10/26/2009, and that the Limited Liability Company is existing so far as shown by the records of the Department.

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 03rd day of November two thousand and nine.

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SECRETARY OF STATE
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