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DEC 1 4 2009

**EXAMINER** 

### **COVER LETTER**

TO:	Registration Section
	Division of Corporation

SUBJECT: DaRIA ENTERPRISES, 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:

Brian J. DesRosiers, Esq., LL.M.

	(Name of Person)	
Cody & Cody, LLC		
	(Firm/Company)	
1 Pine Hill Drive, 5th	Floor	
	(Address)	
Quincy, MA 02169		
(Cit	ty/State and Zip Code)	
or further information concerning this matter	r, please call:	
·		
Brian J. DesRosiers	at ( 617 ) 472-5151	
(Name of Person)	(Area Code & Daytime Telephone Number)	
MAILING ADDRESS:	STREET ADDRESS:	
Division of Corporations	Division of Corporations	
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a check for the following amount:	:	
□\$125.00 Filing Fee		

### 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. DaRIA ENTERPRISES, LLC	9 E
(Name of Foreign Limited Lial	bility Company)
2. Massachusetts 3.	
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4. December 2, 2009 5.	Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6. Began transacting business on registration	n date
(Date first transacted business in Floric (See sections 608.501 & 608.502 F.S. to	da, if prior to registration.) determine penalty liability)
7. 1 Pine Hill Drive, Batterymarch Park II, 5th	n Floor, Quincy, MA 02169
(Street Address of	Principal Office)
8. If limited liability company is a manager-managed co	omnany, check here
, , , , , , , , , , , , , , , , , , , ,	
9. The name and usual business addresses of the manag	ing members or managers are as follows:
DAVID A. GERTH and ANGELA A. GERTH,	Managers both with a business address of
11724 River Shores Trail, Rive Isle @ Rive	r Wilderness. Parrish. FL 34219
10. Attached is an original certificate of existence, no more than 90 day	
the jurisdiction under the law of which it is organized. (A photocopy is translation of the certificate under oath of the translator must be submit	
	,
11. Nature of business or purposes to be conducted or p	romoted in Florida: To engage in the business of general consulting
services as well as real estate management and making investments of all l	kinds and descriptions for profit, and to engage in any and all activities related thereto
y land a State	
	orized representative of a member.
(In accordance with section 608.408(3), F.S., an affirmation under the penalties of perjury	
DAVID A. GERTH, Manage	er

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.

. The name of the Limited Liability Company is:		
Da RIA ENTERPRISES, LLC		
2. The name and the Florida street address of the registered agent and office are:		
DAVID A. GERTH		
(Name)		
11724 River Shores Trail, Rive Isle @ River Wilderness Florida Street Address (P.O. Box NOT ACCEPTABLE)		
Parrish FL 34219 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.

Lauf a Leute (Signature)

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



# The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02133

### December 3, 2009

### TO WHOM IT MAY CONCERN:

I hereby certify that a certificate of organization of a Limited Liability Company was filed in this office by

### DARIA ENTERPRISES, LLC

in accordance with the provisions of Massachusetts General Laws Chapter 156C on **December 2, 2009.** 

I further certify that said Limited Liability Company has filed all annual reports due and paid all fees with respect to such reports; that said Limited Liability Company has not filed a certificate of cancellation or withdrawal; that said Limited Liability Company has not been administratively dissolved; and that said Limited Liability Company is in good standing with this office.

I also certify that the names of all managers listed in the most recent filing are: **DAVID**A. GERTH, ANGELA A. GERTH

I further certify, the names of all persons authorized to execute documents filed with this office and listed in the most recent filing are: **DAVID A. GERTH**, **ANGELA A. GERTH** 

The names of all persons authorized to act with respect to real property listed in the most recent filing are: **DAVID A. GERTH, ANGELA A. GERTH** 



In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth

William Travino Galicin