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SECRETARY OF STATE
ALL ARASSI F FLORIDA

S. HAWKES
DEC 1 4 2009
EXAMINER

COVER LETTER

	istration Section sion of Corporations				
SUBJECT:	FISCO Management Company, LLC Name of Limited Liability Company				
The enclosed Existence, ar	"Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of d 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:				
	Meg Wingert				
	Name of Person				
Munsch Hardt Kopf & Harr, P.C.					
	Firm/Company				
	500 N. Akard St., Suite 3800				
	Address				
	Dallas, Texas 75201				
City/State and Zip Code					
	kellis@fiscofunds.com				
	E-mail address: (to be used for future annual report notification)				
For further in	formation concerning this matter, please call:				
	Meg Wingert at (214) 855-7500				
	Name of Person Area Code & Daytime Telephone Number				
Div Reg P.O	STREET ADDRESS: sion of Corporations stration Section Box 6327 ahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				
Enclosed is	a check for the following amount:				
<u></u> \$	125.00 Filing Fee \$\bigcup \\$130.00 Filing Fee & \bigcup \\$155.00 Filing Fee & \bigcup \\$160.00 Filing Fee, Certificate Copy of Status & Certified Copy				

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: FISCO Management Company, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C., (Name of Foreign Limited Liability Company; must menute the purpose of transacting business in Florida and attach a copy of the written and attach a copy of the written than a managing members adopting the alternate name. The alternate name must include "Limited Liability" Company," "L.L.C," "LLC.") Delaware (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) 10/06/2009 (Duration: Year limited liability company will cease to (Date of Organization) exist or "perpetual") December 1, 2009 (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 7. 1899 Powers Ferry Rd. SE, Suite 120 Atlanta, GA 30339 (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: FISCO Holdings, LLC 1899 Powers Ferry Rd. SE, Suite 120 Atlanta, GA 30339 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 jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign 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: Provide employee services for affiliated entities in group 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.)

FISCO Holdings, LLC By: Harry E. Haynes, managing directory and the 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 the Lim	ited Liability Comp	any is:
	FISCO Manac	gement Company, LLC
If unavailable, the altern	ate to be used in the	e state of Florida is:
2. The name and the Flo	rida street address o	of the registered agent and office are:
		Kevin Ellis
		(Name)
	312 Cle	ematis St., Suite 500
	Florida Street Addi	ross (P.O. Box <u>NOT</u> acceptable)
**************************************	West Pa	Im Beach, FL 33401
		City/State/Zip
liability company at the pagent and agree to act in relating to the proper and obligations of my position	lace designated in th this capacity. I furth l complete performan	o accept service of process for the above stated limited his certificate, I hereby accept the appointment as registered her agree to comply with the provisions of all statutes nce of my duties, and I am familiar with and accept the as provided for in Chapter 608, Florida Statutes.
	\$ 100.00	Filing Fee for Application
	\$ 25.00	Designation of Registered Agent
	S 30.00	Certified Copy (optional)

S 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 "FISCO MANAGEMENT COMPANY, 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 TWENTY-FOURTH DAY OF NOVEMBER, A.D.

2009.

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



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AUTHENTICATION: 7660952

DATE: 11-24-09

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