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DIVISION OF CORPORATION

B. KOHR
MAR 1 6 2010
EXAMINER

#### **COVER LETTER**

Registration Section Division of Corporations

TO:

SUBJECT: _	TOSCANA MUSEUM LLC	
	Name of Limited Liability Company	
	Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," check are submitted to register the above referenced foreign limited liability company to transact business.	ess in Florida
Please return al	Il correspondence concerning this matter to the following:	ASON OF CORPO
	CLARE M. BERCOT	5 82
	Name of Person	CORPORAL 32
	BURTON MCCUMBER & CORTEZ, LLP	آ بن
	Firm/Company	7
	205 PECAN BLVD.	
	Address	
	MCALLEN, TX 78501	
	City/State and Zip Code	
	CBERCOT@BMCTEXAS.COM	
	E-mail address: (to be used for future annual report notification)	
For further info	ormation concerning this matter, please call:	
	CLARE M. BERCOT at ( 956 ) 618-2300  Name of Person Area Code & Daytime Telephone Number	
Divisio Registi P.O. B	Area Code & Daytine Felepholic Number  LING ADDRESS: on of Corporations pration Section Box 6327 Box 6	
Enclosed is a	a check for the following amount:	
\$12	25.00 Filing Fee \$\ \tag{130.00 Filing Fee & Certified Copy} \]  \$130.00 Filing Fee & Certified 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: TOSCANA MUSEUM 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.") 26-1930025 (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) 11/05/2007 PERPETUAL (Duration: Year limited liability company will cease to (Date of Organization) exist or "perpetual") 6. N/A (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 7. C/O BURTON MCCUMNER & CORTEZ, LLP 205 PECAN BLVD., MCALLEN, TX 78501 (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: LORENZO CANTINI - VIA DI CAPORNIA #19, 50139 FIRENZE ITALY DONATELLA MONTINA - LOCALITA ANTRATA 8 INCISA VAL D'ARNO, 50064 FIRENZE MARTA CORSI - VIA PIANDORELLA NO 34 SAN GIMIGNANO, 53037 SIENA ITALY 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: MUSEUM EXHIBITIONS Signature of a member or an authorized representative of a member.

**DONATELLA MONTINA** 

(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.)

Typed or printed name of signee

#### 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:	
TOSCANA MUSEUM LLC	
If unavailable, the alternate to be used in the state of Florida is:	
Toscana Miami Torture	<del></del>
2. The name and the Florida street address of the registered agent and office are:	
Covadonga Talavera	
(Name)	
5740 SW 59 COURT	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Miami Florida 33143 City/State/Zip	
Having been named as registered agent and to accept service of process for the above stated limite liability company at the place designated in this certificate, I hereby accept the appointment as regardent 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 to obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.  (Signature)	zisterea S

Filing Fee for Application

**Certified Copy (optional)** 

**Designation of Registered Agent** 

**Certificate of Status (optional)** 

\$ 100.00

\$ 25.00

\$ 30.00

5.00

#### The State of Texas

Corporations Section P.O. Box 13697 Austin, Texas 78711-3697



Phone: 512-463-5555 Fax: 512-463-5709 Dial 7-1-1 For Relay Services

www.sos.state.tx.us

Re: Original Documents

Dear Sir or Madam:

The attached certificate is an original certificate issued by the Secretary of State. Original certificates issued by the Secretary of State are electronically generated. Consequently, such original certificates are in black and white without gold or raised seals, and they bear the electronic signature of the named Secretary of State.

If you have any questions regarding this matter, please call me at 512-463-5578.

Very Truly Yours,

Renee Dehoyoz Certifying Team

Office of the Texas Secretary of State

Corporations Section P.O.Box 13697 •Austin, Texas 78711-3697



Hope Andrade Secretary of State

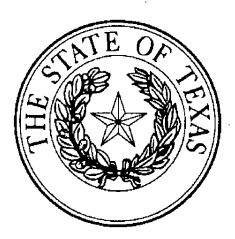
### Office of the Secretary of State

#### **Certificate of Fact**

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for TOSCANA MUSEUM, LLC (file number 800893948), a Domestic Limited Liability Company (LLC), was filed in this office on November 05, 2007.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on February 22, 2010.



Hope Andrade Secretary of State