# MI OF da part ent stat 1493 Division or Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H100000652623)))



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Note: DO	NOT hit the REFRESH/RELOAD page. Doing so will generate a	mother cover sheet.	*PF-SUBMIT*	
To:	Division of Corporation Fax Number : (850)	Please 617-6383 date o	re in origina of submission	l filing
From  **Enter the em  annual re  Email Add	Account Name : C T Confidence : C T Confidence : (850): Fax Number : (850):  ail address for this business port mailings. Enter only	ORPORATION SYSTEM 30000023 222-1092 378-5368	2010 HAR 2.3 SECRETARY TALLAHAS	3/23 TI
SECRETARY OF STATE  TALLAHASSEE, FLORIDA	Foreign Limited Liabi Patten Special Ass Certificate of Status Certified Copy Page Count Estimated Charge		F, Cl	
			C. LEWIS	

MAR 3 1 2010

**EXAMINER** 

. 920-81A-638T

March 24, 2010

## FLORIDA DEPARTMENT OF STATE Division of Corporations

CT CORPORATION SYSTEMS

SUBJECT: PATTEN SPECIAL ASSETS, LLC

REF: W10000014619

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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 further questions concerning your document, please call (850) 245-6955.

Suzanne Bawkes
Regulatory Specialist II
Registration/Qualification Section

FAX Aud. #: H10000065262 Letter Number: 010A00007221

\*RE-SUBMIT\*
Please retain original filing
date of submission 3/23

#### **COVER LETTER**

SUBJECT:	PA	tten special assets, llc
		Name of Limited Liability Company
The enclosed *A Existence, and o	pplication by Foreign Limited heck are submitted to register t	Liability Company for Authorization to Transact Business in Florida," Certificate of he above referenced foreign limited liability company to transact business in Florida
Please return all	correspondence concerning thi	s matter to the following:
	Paula McCarthy	
		Name of Person
	Inland Managemer	nt Corporation
		Firm/Company
	665 Simonds Road	
·		Address
		A.A.C.
	Williamstown, MA	City/State and Zip Code
		,
,	pla ia cona Gao	
•	E-mail address	s: (to be used for future annual report notification)
For further inform	nation concerning this matter, p	lease call:
	Paula McCarthy	at (413 ) 458-5220
•	Name of Person	Area Code & Daytime Telephone Number
	G ADDRESS:	STREET ADDRESS:
	of Corporations	Division of Corporations Registration Section
P.O. Box	ion Section : 6327	Clifton Building
	sec, FL 32314	2661 Executive Center Circle
		Tallahassee, FL 32301
Enclosed is a c	heck for the following amo	ount:
\$125.0	00 Filing Fee S130,00 Fil	ling Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status 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: PATTEN SPECIAL ASSETS, 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 Florids 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.") DELAWARE (Aurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) 3/19/2010 (Date of Organization) (Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability) 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: Michael S. Patter, 645 Simonds Rd. Williamstown, MA 01267 MIE Management Cop., 665 Simonds Rd., Williamstown, MA 01267 (Managing Members) 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 fineign language, a translation of the certificate under cath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida; 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 co an affirmation under the penalties of perjury that the facts stated herein are true.) Typed or printed name of signee

#1.037 - 05/06/2009 C T System Quites

#### 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.

	PATTEN SPECIAL ASSETS, LLC	
If unavailable,	he alternate to be used in the state of Florida is:	
2. The name an	d the Florida street address of the registered agent and office are:	_
	C T Corporation System C Name)	2010 MAR 23
	1200 South Pine Island Road  Florida Street Address (P.O. Box NOT ACCEPTABLE)	•
	Plantation 177 33324	of SIATE
	City/State/Zip	>
liability company agent and agree : relating to the Ir obligations of my	ned as registered agent and to accept service of process for the above stated limited at the place designated in this certificate, I hereby accept the appointment as regis to act in this capacity. I further agree to comply with the provisions of all statutes open and complete performance of my duties, and I am familiar with and accept the position as registered agent as provided for in Chapter 608, Florida Statutes.	tered

\$ 100.00 Filing Fee for Application

\$ 25.00 30.00

5.00

Designation of Registered Agent

Certificate of Status (optional)

Certified Copy (optional)

BALVINA AMENTA-GRAY

EPECIAL ASSISTANT CECRETARY

# Delaware

PAGE 1

### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PATTEN SPECIAL ASSETS, 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-SECOND DAY OF MARCH, A.D. 2010.

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

4801850 8300

100298887

You may verify this certificate online

jatingy W. Bullack, Socretary of State

DATE: 03-22-10