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Special Instructions to Filing Officer:

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**EXAMINER** 

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#### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Eleven O'clock ausbruates, 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:
Rose Marie Mc Conlogue_ Name of Person
Eleven O'clock Associates, Lic
16723 Pheasant Ct. ALE STATES Address
City/State and Zip Code
E-mail address: (to be used of future annual report notification)
For further information concerning this matter, please call:
Rose MMC Conloque at 239 6765311  Name of Person Area Code & Daytime Telephone Number
MAILING ADDRESS:  Division of Corporations Registration Section P.O. Box 6327 Tallahassee, 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:  \$\sum_{125.00}\$ \text{Filing Fee} \text{ \$\sum_{130.00}\$ Filing Fee & Certificate of Status } \text{ \$\sum_{155.00}\$ Filing Fee & Certified Copy of Status & Certified Copy } \text{ \$\sum_{156.00}\$ Filing Fee, Certified Copy } \text

## 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:
Eleven Polock Associates L.LC.
(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.")
2. Connecticut (Jurisdiction under the law of which foreign limited liability company is organized)  3. (FEI number, if applicable)
4. December 19 1995 (Date of Organization)  5. December 19 1995 (Duration: Year limited liability company will cease to exist or "perpetual")
6. March 1 2010  (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
(See sections 608,501 & 608,502 F.S. to determine penalty liability)  7. 167 23 Pheasant Ct.
Ft. Muera FL 33908
(Street Address of Principal Office)
8. If limited liability company is a manager-managed company, check here Signature & Signa
9. The name and usual business addresses of the managing members or managers are as follows:
Daniel K. McConlogue
16723 Pheasant CT
A. Myers, Fl 33900
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: Real Stevent
Investment Advisor
Law M'Cynlegue
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)
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.

1. The name of the Limited Liability Company is:	
Eleven O'clock Associates, UC	
If unavailable, the alternate to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office are:  Daniel K. McConloque  (Name)  16723 Pheasant Ct.  Florida Street Address (P.O. Box NOT ACCEPTABLE)	TI
FL 33908 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)

Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State, and keeper of the seal thereof, DO HEREBY CERTIFY, that articles of organization for

#### ELEVEN O'CLOCK ASSOCIATES, L.L.C.

a domestic limited liability company, were filed in this office on December 19, 1995.

Articles of dissolution have not been filed, and so far as indicated by the records of this office such limited liability company is in existence.

Secretary of the State

Date Issued: July 01, 2010

Business ID: 0527965 Express Certificate Number: 2010163492001

Note: To verify this certificate, visit the web site http://www.concord.sots.ct.gov