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EXAMINER

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EUNE LARY OF STATE WISION OF CORPORATIONS

515 EAST PARK AV	PDIRECT AGENTS, INC. (formerly CCRS) AST PARK AVENUE AHASSEE, FL 32301 73					
FILING COVER S ACCT. #FCA-14	SHEET ()					
CONTACT:	KATIE WONSCH					
DATE:	10/15/2010					
REF. #:	000668.134462					
CORP. NAME:	BALOGH FAMILY HOLDINGS LLC					
() ARTICLES OF INCO () ANNUAL REPORT (XX) FOREIGN QUALIF () REINSTATEMENT () CERTIFICATE OF C () OTHER:	() TRADEMARK/SERVICE MARK () FICTITIOUS NAME FICATION () LIMITED PARTNERSHIP () LIMITED LIABILITY () MERGER () WITHDRAWAL					
STATE FEES PF	REPAID WITH CHECK# 537050 FOR \$ 155.00					
AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:						
	COST LIMIT: \$					
PLEASE RETUR	EN:					
(XX) CERTIFIED CO	OPY () CERTIFICATE OF GOOD STANDING () PLAIN STAMPED COPY STATUS					

Examiner's Initials

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

ı	RAI	OGH	FAMIL	Y HOL	DINGS I	$\mathbf{I} \cap$

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LI.C."

(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.")

	mpany." "L.L.C." "LLC.")	em	are name. The alternate name must metude "Ellinted Diabili	
2.	Delaware	3.	650628727	
	(Jurisdiction under the law of which foreign limited liability company is organized)		(FEI number, if applicable)	
‡ .	October 15, 2010	5.	perpetual	
	(Date of Organization)		(Duration: Year limited liability company will cease to exist or "perpetual")	
ś.	Upon registration			
	(Date first transacted business in F (See sections 608.501 & 608.502 F.)	lor S. 1	ida, if prior to registration.) o determine penalty liability)	
7.	777 Arthur Godfrey Road, Suite 400			
	Miami Beach, Florida 33140			
	(Street Addres	s o	f Principal Office)	
3.	. 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:			
	ROBERT B. BALOGH		ORLI TEITELBAUM	
	777 Arthur Godfrey Road, Suite 400		777 Arthur Godfrey Road, Suite 400	
	Miami Beach, Florida 33140		Miami Beach, Florida 33140	

- 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: any lawful business

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

ORLI TEITELBAUM

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.

I. The name of	the Limited Liability Company is:
BALOGH	FAMILY HOLDINGS LLC
If unavailable, t	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:
	ORLI TEITELBAUM
	(Name)
	777 Arthur Godfrey Road, Suite 400
	Florida Street Address (P.O. Box NOT ACCEPTABLE)
	Miami Beach FL 33140
	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)

Delaware

PAGE

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "BALOGH FAMILY HOLDINGS, 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 FIFTEENTH DAY OF OCTOBER, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BALOGH FAMILY HOLDINGS, LLC" WAS FORMED ON THE FIFTEENTH DAY OF OCTOBER, A.D. 2010.

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

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AUTHENTICATION: 8292691

DATE: 10-15-10

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