# "M10000005090

| (Requestor's Name)  (Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer: |   |
|--|---|
| (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status   | (Requestor's Name)                      |
| (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status   |   |
| (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  | (Address)                               |
| (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  |   |
| PICK-UP WAIT MAIL.  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status   | (Address)                               |
| PICK-UP WAIT MAIL.  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status   |   |
| (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status   | (City/State/Zip/Phone #)                |
| (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status   |   |
| (Document Number)  Certified Copies Certificates of Status   | PICK-UP WAIT MAIL                       |
| (Document Number)  Certified Copies Certificates of Status   |   |
| (Document Number)  Certified Copies Certificates of Status   | (Rusiness Entity Name)                  |
| Certified Copies Certificates of Status  | (Business Littly Waite)                 |
| Certified Copies Certificates of Status  |   |
|  | (Document Number)                       |
|  |   |
| Special Instructions to Filing Officer:  | Certified Copies Certificates of Status |
| Special Instructions to Filing Officer:  |   |
|  | Special Instructions to Filing Officer: |
|  |   |
|  |   |
|  |   |
|  |   |
| !  |   |
|  |   |
| i  |   |

Office Use Only



300187745773

11/17/10--01011--030 \*\*138.00



D. BRUCE
NOV 1 8 2010
EXAMINER

#### **COVER LETTER**

| TO: Registration Section Division of Corporations   |
|---|
| SUBJECT: BERGIN FAIVILY VVYOIVIING 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:   |
| IOSULIA O DODGEV ESO  |
| JOSHUA O. DORCEY, ESQ.  Name of Person  |
|   |
| THE DORCEY LAW FIRM PLC   |
| Firm/Company  |
| 10181 SIX MILE CYPRESS PKWY, STE. C   |
| Address   |
| FORT MYERS EL 22066   |
| FORT MYERS, FL 33966  City/State and Zip Code   |
| St. ber sange   |
| JOSH@DORCEYLAW.COM  |
| JOSH@DORCEYLAW.COM  E-mail address: (to be used for future annual report notification)  |
| For further information concerning this matter, please call:  |
| Co Co   |
| JOSHUA O. DORCEY, ESQ. at (239 ) 418-0169   |
|   |
| MAILING ADDRESS: STREET ADDRESS: Division of Corporations Division of Corporations  |
| Registration Section Registration Section   |
| P.O. Box 6327 Cliffon Building  |
| Tallahassec, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301  |
| Enclosed is a check for the following amount:  \$\int_{\text{S125.00 Filing Fee}} \int_{\text{S130.00 Filing Fee}} \int_{\text{Certificate}} \int_{\text{Certified Copy}} \int_{\text{S160.00 Filing Fee}} \int_{\text{Certified Copy}} \int_{\text{S160.00 Filing Fee}} \int_{\text{Certified Copy}} \int_{\text{S160.00 Filing Fee}} \int_{\text{Certified Copy}} \int_{\text{Certified Copy}} \int_{\text{S160.00 Filing Fee}} \int_{\text{S160.00 Filing Fee}} \int_{\text{Certified Copy}} \int_{\text{S160.00 Filing Fee}} \int_{S160.00 Filing F |

#### 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

| LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:  |
|--|
| 1. BERGIN FAMILY WYOMING LLC  (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "Li.C.")  |
| ( and of the light and the company, must mende blanks company, black, or black, )  |
| (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. WYOMING 3. 27-3918583   |
| (Jurisdiction under the law of which foreign limited liability company is organized)  (FEI number, if applicable)  |
| 4. NOVEMBER 5. PERPETUAL   |
| (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")   |
| 6  |
| (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)  |
| 7. 19871 Chapel Trace, Estero, FL 33928  |
| 5 3  |
| (Street Address of Principal Office)  8. If limited liability company is a manager-managed company, check here   |
| 8. If limited liability company is a manager-managed company, check here   |
| The state of the s |
| 9. The name and usual business addresses of the managing members or managers are as follows:   |
| Brenda Bergin & Peter Bergin   |
| 19871 Chapel Trace, Estero, FL 33928   |
|  |
|  |
| 10. Attached is an original certificate of existence, no more than 90 days old, duty 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 PURPOSE   |
| ANT ENTITION OF THE PARTY OF TH |
|  |
| 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.)   |
| Dos 400 Delect FSF   |
| 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:                                      |            |          |            |
|---|------------|----------|------------|
| BERGIN FAMILY WYOMING LLC   |            | _        |            |
| 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:    | a loc      | -        |            |
| JOSHUA O. DORCEY, ESQ. (Name)   | LAHAS      | 7 NON 01 | Contractor |
| 10181 SIX MILE CYPRESS PKWY., STE. C Florida Street Address (P.O. Box NOT ACCEPTABLE) | HO.        | 7 PH 5:  |            |
| FORT MYERS FL 33966 City/State/Zip  | AUE<br>NDA | පා       |            |

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.

\$ 100.00 Filing Fee for Application

(Signature)

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

### STATE OF WYOMING Office of the Secretary of State

I, MAX MAXFIELD, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

## Bergin Family Wyoming, LLC is a Limited Liability Company

formed or qualified under the laws of Wyoming did on **November 4**, **2010**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2010-000592149**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 18th day of November, 2010 at 8:43 AM. This certificate is assigned 008747224,



May Malfield Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.