M10000005262

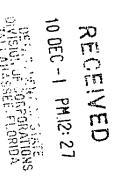
(Requestor's Name)					
(Address)					
(Address)					
. (City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



400188187874

12/01/10--01014--024 **155.00



10 DEC -1 PM 4: 31

B. KOHR
DEC 1 4 2010
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	,
SUBJECT: Pacific Publishing an	d Communications, LLC
1	Name of Limited Liability Company
	iability Company for Authorization to Transact Business in Florida," Ce above referenced foreign limited liability company to transact business
Please return all correspondence concerning this	matter to the following:
Robert Hardy	
	Name of Person
Pacific Publishing and (Communications, LLC
	Firm/Company
1830 East Park Ave.	
	Address
Tallahassee, FL 3230	1
	City/State and Zip Code
terry@homesandlar	nd.com
E-mail address	s: (to be used for future annual report notification)
For further information concerning this matter, p	lease call:
Terry Smith	at (850) 574-2111 Area Code & Daytime Telephone Number
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 am \$125.00 Filing Fee \$\int_{\text{State}}\$130.00 Filing Certificate of \$\text{State}\$	Fee & \$\int\\$155.00 Filing Fee & \int\\$160.00 Filing Fee, Certificate

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:

Design Deltistism and Operation and LO
Pacific Publishing and Communications, 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.")
Company, E.E.C.
2. California 3. 27-4065976
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. 11/19/10 5. Perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6.
(See sections 608.501 & 608.502 F.S. to determine penalty liability)
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 7. 1830 East Park Ave.
Tallahassee, FL 32301
(Street Address of Principal Office)
8. If limited liability company is a manager-managed company, check here
O. The company of the circumstate of the company of
 The name and usual business addresses of the managing members or managers are as follows: ROBERT A. HARDY
1830 East Park Ave.
Tallahassee, FL 32301
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: Corporate offices for
the production and printing of real estate magazines.
· \
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.)
Robert A. Hardy

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:					
Pacific Publishing and Communications, 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:					
Robert Hardy					
(Name)					
1830 East Park Ave.					
Florida Street Address (P.O. Box NOT ACCEPTABLE)					
Tallahassee FL 32301 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.

\$ 100 00 Filing Fee for Application

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)



State of California Secretary of State

LIMITED LIABILITY COMPANY ARTICLES OF ORGANIZATION - CONVERSION

Pilo # 201032310171

ENDORSED - FILED in the office of the Secretary of State of the State of California

NOV 1.9 2010

+	MPORTANT - Read all Instruct	Inne haters completing this i	OPTI	This so	ace For Filling User Only			
<u> </u>	CONVERTED ENTITY INFORMATIO		031117		and it do it will be to the			
_	NAME OF LIMITED LIABILITY COMPAN		Liability Co.	moner "Lid Lisbelle C	Company " 'I id Lightily Co. ' or the			
•	abbreviation "LLC" or "LL.C.")	· Princip and an divine Remark			way and a second of the second			
	Pacific Publishing and Communic							
ż	THE PURPOSE OF THE LIMITED LIABIL COMPANY MAY BE ORGANIZED UNDE	ty golipany is to engage in any r the beverly-killea limited liae	EAWFLE AN	OT OR ACTIVITY FOR PANY ACT	YTHEN A KOHEN			
3	3 THE LIMITED LIABILITY COMPANY WILL BE MANAGED BY (Check phly one)							
	ONE MANAGER	MORE THAN OHE MANAGER		AIL LIMITED L	ability company member(s)			
4.	MAJLING ADDRESS OF THE CHIEF EXE	GUTIVE OFFICE	CITY	NO STATE	ZIP CODE			
	1830 East Park Avenue		Tellaha	Tellahassee, Florida				
5	NAME OF AGENT FOR SERVICE OF PE completed, if the agent is a corporation, it section 1505 and item 5 muss be computed. National Registered Agents, Inc.	to agent must have on the with the Calif						
8	IF AN INDIVIDUAL, ADDRESS OF AGENT	POR SERVICE OF PROCESS IN CA	CNY		STATE ZIP CODE CA			
	INVERTING ENTITY INFORMATION				 			
	NAME OF CONVERTING ENTITY							
	Pacific Publishing and Communica	tions, inc.						
	FORM OF ENTITY	B. JURIBBICTION		. CA SECRETARY O	F STATE FILE NUMBER, IF ANY			
	corporation	California	- 1	C	1238928			
	THE PRINCIPAL TERMS OF THE PLAN OF C THAT EQUALED OR EXCREDED THE VOTE							
	STATE THE CLASS AND NUMBER OF OUTE	randing interests entitled to vot	E AND T	HE PERCENTAGU VOT	E REQUIRED OF EACH CLASS			
100% of the lasted 3,833 shares of common stock					100%			
10	DITIONAL INFORMATION							
	ADDITIONAL INFORMATION SET FORTH OPART OF THIS CERTIFICATE.	IN THE ATTACHED PAGES, IF ANY, IS	INCORPOR	WITED HEREIN BY TH	IIS REFERENCE AND MADE A			
	CERTIPY UNDER PENALTY OF PERJURY US WAN KNOWN EDGE. I DECLARE I AM THE PE							
\ -	Skin feldt Ell				rman of thebboa			
6	HONKTURE OF AUTHORIZED PERSON.	UKTE TYPE	OR PRINT	NAME AND TITLE OF	AUTHORIZED PERSON.			
5	CONATURE OF AUTHORIZED PERSON			ly, CFO and Secre	AUTHORIZED PERSON			
	. (GE)((TO)(O)(K)	,			ROVED BY SECRETARY OF STATE			
الاش	√ (NEA @a≤òo⊋)				RUYEV DI SEURBIANT UN BIAIR)			

I hereby certify that the foregoing transcript of _______page(s) is a full, true and correct copy of the original record in the custody of the Californio Secretary of State's office.

NOV 20 2010 LE

Date:

DEBRA BOWEN, Secretary of State