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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2010 DEC -8 AM 11:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

CUMMINGS & LOCKWOOD LLC



M. Travis Hayes
Master of Laws in Estate Planning

239.649.3118 Direct
239.430.3347 Fax
thayes@cl-law.com
www.cl-law.com

Street Address:
Collier Place II
3001 Tamiami Trail North
Suite 400
Naples, FL 34103

Post Office Address:
P.O. Box 413032
Naples, FL 34101

239.262.8311 Phone
239.263.0703 Fax

December 7, 2010
Via Federal Express

Department of State
Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

**RE: *Application by Foreign Limited Liability Company for Authorization to
Transact Business in Florida***

To Whom It May Concern:

Enclosed please find the filing fee, cover letter and application by Capricorn Atlantic Holdings LLC, a limited liability company formed in Anguilla, West Indies, for authorization to transact business in the state of Florida.

As this is a time-sensitive matter, please do not hesitate to contact me if there are any issues with the enclosed documents or if you need any additional information in order to approve the application.

Sincerely,

Travis Hayes

Enclosures
2690667_1.doc 12/7/2010

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Capricorn Atlantic Holdings 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:

M. Travis Hayes, Esq.

Name of Person

Cummings & Lockwood LLC

Firm/Company

3001 Tamiami Trail North, Suite 400

Address

Naples, Florida 34103

City/State and Zip Code

thayes@cl-law.com

E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 DEC -8 AM 11:09

FILED

For further information concerning this matter, please call:

M. Travis Hayes at (239) 262-8311

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:

- ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☒ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. Capricorn Atlantic Holdings 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.")

2. Anguilla, West Indies

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 98-0417364

(FEI number, if applicable)

4. February 7, 2003

(Date of Organization)

5. perpetual

(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. First Anguilla Trust, Mitchell House

Post Office Box 174, The Valley, Anguilla

(Street Address of Principal Office)

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:

Elayne Herrick

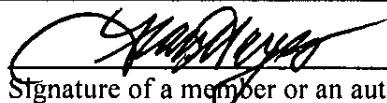
2295 Corporate Boulevard NW, Suite 222

Boca Raton, Florida 33431

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:

To engage in any lawful business or activity permitted by the Florida Limited Liability Act (F.S. Section 608.41, et. seq.)



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.)

M. Travis Hayes, Esq.

Typed or printed name of signee

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

FILED

**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:

Capricorn Atlantic Holdings 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:

Corporation Service Company

(Name)

1201 Hays Street

Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Tallahassee

FL 32301

City/State/Zip

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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.

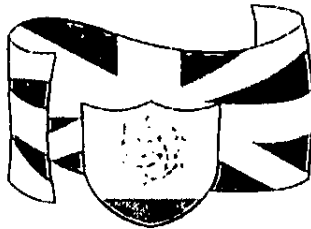
Corporation Service Company

By: Pamela L Simpson

(Signature)

Pamela L. Simpson, Asst. Vice President

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)



ANGUILLA

LIMITED LIABILITY COMPANY ACT, 2000

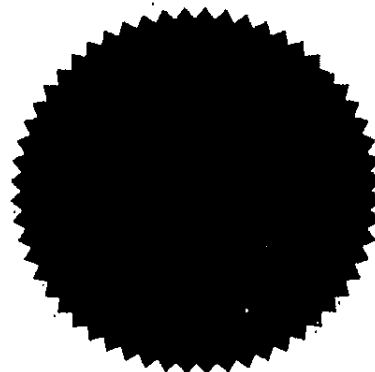
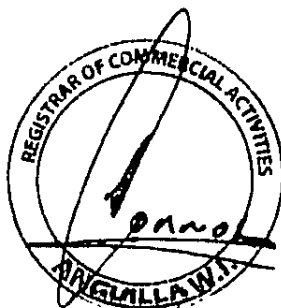
CERTIFICATE OF GOOD STANDING

Company Number 3000906

The Registrar of Companies hereby certifies that

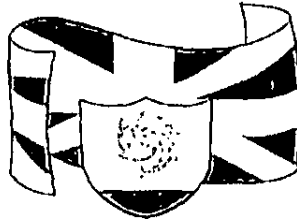
Capricorn Atlantic Holdings LLC

is in good standing with the registry, has filed
all documents due as required and has paid all relevant fees



Registrar of Companies

Dated this 6th day of December 2010



ANGUILLA

LIMITED LIABILITY COMPANY ACT, 2000

CERTIFICATE OF GOOD STANDING

Company Number 3000906

The Registrar of Companies hereby certifies that

Capricorn Atlantic Holdings LLC

is in good standing with the registry, has filed
all documents due as required and has paid all relevant fees

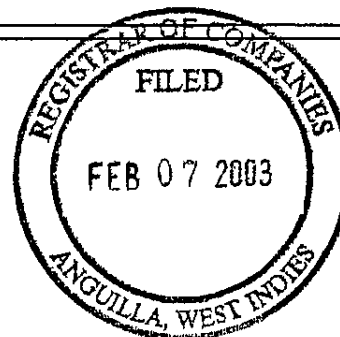


Registrar of Companies

Dated this 6th day of December 2010



LIMITED LIABILITY COMPANY ACT
ARTICLES OF FORMATION
(Section 11)



1. Name of Company
Capricorn Atlantic Holdings LLC

2. Registered Agent
FINSCO LIMITED

3. Registered Office

Address
Mitchell House
The Valley
Anguilla
B.W.I

Mailing Address
Mitchell House
P.O.Box 174
The Valley
Anguilla
B.W.I

4. Latest Dissolution Date N/A

5. Effective Date of Formation DATE OF FILING

6. Other matters (If any)
None

7. Submitted By
Name Atrene M Pemberton

Office Held	DIRECTOR OF FINSCO LIMITED		
For and on behalf of	FINSCO LIMITED		
Address	Mitchell House The Valley Anguilla B.W.I	Mailing Address	Mitchell House P.O.Box 174 The Valley Anguilla B.W.I
Date	07-Feb-2003		

Submitted By	Atrene M Pemberton	Agency	FINSCO LIMITED
Doc Ref No.	3-FRM-104		
Digitally signed by	ATRENE M PEMBERTON	Date	07-Feb-2003

