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J. SAULSBERRY EXAMINER DEC 13 2010

### **COVER LETTER**

Registration Section Division of Corporations

TO:

SUBJECT: SHAFFER & GAIER, LLC					
Name of Limited Liability Company					
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Existence, and check are submitted to register the above referenced foreign limited liability company to trans	n Florida nsact bus	ı," Cert siness i:	ificate of n Florida		
Please return all correspondence concerning this matter to the following:					
Michael H. Gaier, Esq.		_			
Name of Person					
Shaffer & Gaier, LLC		_			
Firm/Company					
One Penn Center Plaza, 1617 JFK Blvd, Suite 946					
Address					
Philadelphia, PA 19103		_			
City/State and Zip Code					
mhgaier@shaffergaier.com		O 0 107	lace districts and a		
E-mail address: (to be used for future annual report notification)	35	0	etotora piano		
For further information concerning this matter, please call:	60	0	<b>Y</b>		
	- Tan-1	P			
Michael H. Gaier, Esq. at (215) 751-0100	<u> </u>		Anna		
Name of Person Area Code & Daytime Telephone Number	Zi.	։ կ3			
MAILING ADDRESS:  Division of Corporations  STREET ADDRESS:  Division of Corporations	7.	ω			
Registration Section Registration Section					
P.O. Box 6327 Clifton Building					
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301					
Enclosed is a check for the following amount:  \$\sumset\$\$\sumset\$\$\sumset\$\$\$\sumset\$					

## 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:

	SHAFFER & GAIER, LLC
1.	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
CO	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written asent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability impany," "L.L.C," "LLC.")
	Pennsylvania 3. <u>77-0608981</u>
	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4.	09/05/2003  (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.	One Penn Center , Suite 946, 1617 JFK Blvd., Philadelphia, PA 19103
	(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:
	Michael Shaffer, 1617 JFK Blvd, Suite 946, Philadelphia, PA 19103
	Michael Gaier, 1617 JFK Blvd, Suite 946, Philadelphia, PA 19103
th tra	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in e jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a inslation of the certificate under eath of the translator must be submitted.)  1. Nature of business or purposes to be conducted or promoted in Florida: Legal Practice
	Signature of a member of 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.)

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.

Shaffer & G	alternate to be used in	the state of Florida is:			_
2. The name and	the Florida street addres	ss of the registered agent and office are:			-
E	lizabeth Shields				
_		(Name)	age 10 th		
5	550 Glades Road		ALLA ALLA	2010 DEC 10	Mercan To
-	Florida Street A	Address (P.O. Box NOT ACCEPTABLE)		. J.	£.
Е	Boca Raton,	<sub>FL</sub> 33431	M.C.		i
		City/State/Zip		PH :: 43	ye >-
liability company of agent and agree to	at the place designated in act in this capacity. I fi	nd to accept service of process for the above in this certificate, I hereby accept the appoin further agree to comply with the provisions mance of my duties, and I am familiar with	ntment a of all sta	s regist itutes	ered

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)

## COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

**NOVEMBER 29, 2010** 

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

#### **SHAFFER & GAIER, LLC**

is duly organized as a Pennsylvania Limited Liability Company under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT, This Certificate of Good Standing shall not imply that all fees, taxes, and penalties owed to the Commonwealth of Pennsylvania are paid.

IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Secretary of the Commonwealth

Basil L. Merenda

Certification Number: 9138982-1