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SECRETARY OF STATE
TANDA ANASSEE FOORIDA

C. LEWIS
Jan. 6, 2011
EXAMINER



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

December 29, 2010

THOMAS G. FITZGERALD 1221 GULF SHORE BLVD. N. #701 NAPLES, FL 34102

SUBJECT: TF MANAGEMENT, LLC Ref. Number: W10000059715

We have received your document for TF MANAGEMENT, LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any further questions concerning your document, please call (850) 245-6047.

Letter Number: 710A00030055

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

#### **COVER LETTER**

| TO: Registration Section Division of Corporations  |  |  |  |
|--|--|--|--|
| SUBJECT: TF Management, LLC  |  |  |  |
| Name of Limited Liability Company  |  |  |  |
| The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Ce Existence, and check are submitted to register the above referenced foreign limited liability company to transact business |  |  |  |
| Please return all correspondence concerning this matter to the following:  |  |  |  |
| Thomas G. Fitzgerald_  |  |  |  |
| Name of Person   |  |  |  |
|  |  |  |  |
| Firm/Company   |  |  |  |
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| 1221 Gulf Shore Blvd. N., #701  Address  |  |  |  |
| Audress  |  |  |  |
| Naples, Florida 34102  |  |  |  |
| City/State and Zip Code  |  |  |  |
| tom @ bucan com  |  |  |  |
| E-mail address: (to be used for future annual report notification)   |  |  |  |
| For further information concerning this matter, please call:   |  |  |  |
| Thomas G. Fitzgerald 37 239 207-0335   |  |  |  |
| Thomas G. Fitzgerald at (239) 207-0335  Name of Person Area Code & Daytime Telephone Number  |  |  |  |
|  |  |  |  |
| MAILING ADDRESS:  Division of Corporations  STREET ADDRESS:  Division of Corporations  |  |  |  |
| 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: \$125.00 Filing Fee \$\bigs\\$130.00 Filing Fee & \$\bigs\\$155.00 Filing Fee & \$\bigs\\$160.00 Filing Fee, Certificate   |  |  |  |
| Certificate of Status Certified Copy of Status & Certified Copy  |  |  |  |

## 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:

| LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:   |  |  |  |
|---|--|--|--|
| 1. TF Management, LLC  (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")   |  |  |  |
| (value of Foreign Elimited Elability Company, must include Elimited Elability Company, E.E.C., of EEC.)   |  |  |  |
| (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. Illinois  (Jurisdiction under the law of which foreign limited liability company is organized)  3. O3-0500297  (FEI number, if applicable)   |  |  |  |
| 4. December 12, 2002 (Date of Organization)  5. perpetual (Duration: Year limited liability company will cease to exist or "perpetual")   |  |  |  |
| 6. December 28, 2010  |  |  |  |
| (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)   |  |  |  |
| 7. 1221 Gulf Shore Blvd. N., #701   |  |  |  |
| Naples, Florida 34102   |  |  |  |
| (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:  |  |  |  |
| Thomas G. Fitzgerald, 1221 Gulf Shore Blvd. N., #701, Naples, Florida 34102 g   |  |  |  |
| Joyce M. Fitzgerald, 1221 Gulf Shore Blvd. N., #701, Naples, Florida 34102  |  |  |  |
|   |  |  |  |
| 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: Holding title to real  |  |  |  |
| and personal property and all other purposes authorized or permitted under Florida law  |  |  |  |
| 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.)  |  |  |  |

Typed or printed name of signee

Thomas G. Fitzgerald

## 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:   |                               |
|--|-------------------------------|
| TF Management, LLC   |                               |
| If unavailable, the alternate to be used in the state of Florida is:   |                               |
| TF Management (Florida), LLC   |                               |
| 2. The name and the Florida street address of the registered agent and office are  |                               |
| Thomas G. Fitzgerald   | ZIII JAN<br>SEUREI<br>TABELAH |
| (Name)   | ASSET IN                      |
| 1221 Gulf Shore Blvd. N., #701  Florida Street Address (P.O. Box NOT ACCEPTABLE)   |                               |
| The same states of the same stat | OF SINIE                      |
| Naples <sub>FL</sub> 34102   | 93.55<br>                     |
| 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

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

File Number

0082502-6



### To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

TF MANAGEMENT, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON DECEMBER 12, 2002, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.



Authentication #: 1100400316

Authenticate at: http://www.cyberdriveillinois.com

In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 4TH day of JANUARY A.D. 2011.

Desse White

SECRETARY OF STATE