1100000000913

(Reque	stor's Name)
(Addres	ss)	· · · · · · · · · · · · · · · · · · ·
. (Addre	ss)	-
	·	
(City/Si	tate/Zip/Phor	ne #)
PICK-UP	WAIT	MAIL
(Busine	ess Entity Na	nme)
(Docur	nent Numbe)
Certified Copies	Certificate	es of Status
Special Instructions to Filin	ng Officer	

A. LUNT

FEB 2 2 2010

EXAMINER 1924

Office Use Only



800189105158

02/07/11--01042--022 **155.00

2011 FEB 21 PM 3: 36
SEGRETARY OF STATE



February 9, 2011

DEANNA STANLEY 4144 N. CENTRAL EXPY SUITE 800 DALLAS, TX 75204

SUBJECT: MARKET ALTERNATIVES, LLC

Ref. Number: W11000007924

We have received your document for MARKET ALTERNATIVES, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the name, title, and business address of each managing member or manager who will manage the foreign limited liability company in the state of Florida. Please insert "MGRM" in the title portion for each managing member and "MGR" in the title portion for each manager.

Chapter 608, Florida Statutes, does not allow limited liability companies to issue shares or stock. Consequently, limited liability company documents cannot contain any references/terms which may implicate otherwise. Please delete any references to terms such as "shares," "stock," "stockholders," "shareholders" or the like from your document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 711A00003441

*** PROMPT ATTENTION REQUESTED ***

2/2/2011

Corp. Div. FL Secy. of State P.O. Box 6327 Tallahassee, FL 32314

Re: Market Alternatives, LLC

Enclosed are the necessary applications to qualify the above referenced foreign corporation. Included are check(s) in the amount of \$155.00.

This corporation is anxious to obtain an insurance license in your state. Therefore, please process their application as soon as possible and forward the approved duplicate copy (if applicable) and Certificate of Authority to my attention (ppd. env. attached).

If you have any questions or require additional information, please contact me at 214-855-0737. Your cooperation and prompt attention to this request is greatly appreciated.

Sincerely, Kennedy Licensing Service, Inc.

Deanna Stanley

Deanna Stanley
Vice President & Initial Lic'g Manager
Email: dstanley@kennedylicensing.com

cc: Market Alternatives, LLC VICTRIX (FL), Reg. Agt.

Enc: \$155.00 fee, App. in dup.,, Cert. G.S.

COVER LETTER

JAN 3 1 2011

TO: Registration Section Division of Corporations	<i>''</i>
SUBJECT: Market Alternatives LC (Name of Limited Liability Company)	
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Busin Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida	ess in ited
Please return all correspondence concerning this matter to the following:	
Dearna Stanley (Name of Person)	
Kennedy Licensing Service, Inc. (Firm/Company)	
4144 N. Central Expy., Suite 800	
(Address)	
Dallas, TX 75204	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
(Name of Person) (Area Code & Daytime Telephone Number)	
(Name of Person) (Area Code & Daytime Telephone Number)	
MAILING ADDRESS: STREET ADDRESS:	
Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building	
Tallahassee, FL 32314 Chitch Bunding 2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a check for the following amount: \$\sum_\$\$125.00 \text{Filing Fee} \sum_\$\$130.00 Filing Fee & Sisson Filing Fee & Sisson Filing Fee, Certificate of Status Certified Copy of Status & Certificate Copy o	

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 FORE LIMITED LIABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	IGN
1. Market Alternatives LLC (Name of Foreign Limited Liability Company)	
2. (Jurisdiction under the law of which foreign limited liability company) company is organized) (Name of Poteign Limited Liability Company) (FEI number, if applicable)	
4. One of Organization) 5. perpetual (Duration: Year limited liability company will cease to exist or "perpetual")	
6. Open Dual. (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7. 215 South Main Street Newark, NY 14513 215 South Main Street Newark, NY 14513 (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: SEE ATTACHED LIST	- 1
	, (
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records 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 onth of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida:	sin
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 paritry that the facts stated herein are true.) Typed or printed name of signee	

MARKET ALTERNATIVES, LLC

Larry M. DePauw

waraging

Member

2361 Ford Rd.

Newark, NY 14513

FILED PH 9: 37
2011 FEB 21 PH 9: 37

bus address— 215 South Main Street Newark, NY 14513

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:		
Market Alternatives, LLC		
If name unavailable, the alternate name to be used in the state of Florida is:		
	75 7	
2. The name and the Florida street address of the registered agent and office are:	2011 FEB 21 SCRAE DAR ALLAHASS	-
John D. Natch Esquire	101'27 101'-4!	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	PH 3: 37	Parameter S.
Tarpon Springs FL 34688 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.

(Signature)

\$ 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 New York Department of State } ss:



I hereby certify, that MARKET ALTERNATIVES, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 07/10/2001, and that the Limited Liability Company is existing so far as shown by the records of the Department.



WITNESS my hand and the official seal of the Department of State at the City of Albany, this 26th day of November two thousand and ten.

First Deputy Secretary of State