Division of Corporations **Electronic Filing Cover Sheet** 

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H11000071992 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: NATIONAL CORPORATE RESEARCH, LTD

Account Number : I20000000088

Phone

: 866.775.0(12

Fax Number

866.775.0113

\*\*Enter the email address for this business entity to be used for fulfare annual report mailings. Enter only one email address please.

Email Address:

JONATHAN PORTER

### Foreign Limited Liability Company Gamut Properties, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

J. SAULSBERRY EXAMINER

03/18/2011 14:45

(((H110000719923)))

## 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 INVITED LARGE ITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	MITED LIABILITY CONTRACT TO THE WAY TO SEE THE STATE OF TEXALS.		
1.	Gamut Properties, LLC		
	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")		
(II	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the write	iten	
	nsent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability		
Cc	ompany," "L.L.C," "LLC.")		
2	Indiana 3		
	diction under the law of which foreign limited liability (FEI number, if applicable)		
	company is organized)		
4	February 14, 2011 5. Perpetual		
••	(Date of Organization) (Duration: Year limited liability company will cease to		
	exist or "perpetual")		
5	N/A		
-,	(Date first transacted business in Florida, if prior to registration.)		
	(See sections 608.501 & 608.502 F.S. to determine penalty matrix)		
7.	(See sections 608.501 & 608.502 F.S. to determine penalty liability)  251 East Ohio Street, Suite 1100	-	
	Em S	+ 3	
	mulanapolis, indiana 40204	,	
	(Street Address of Principal Office)	1	
,	If limited liability company is a manager-managed company, check here		
		Ē	
<b>.</b>	The name and usual business addresses of the managing members or managers are as follows:	***	
7.	The name and usual outliness addresses of the managing members of managers are as follows:		
	Robert Phillips		
	600 East 96th Street, Suite 130		
	Indiananalia INI 46040		
	Indianapolis, IN 46240		
ın	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records	in	
	jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a	_	
	relation of the certificate under oath of the translator must be submitted.)		
	·		
1	. Nature of business or purposes to be conducted or promoted in Florida: Any lawful business activities permitted		
	by the Company's Operating Agreement or, in the abgence thereof, in accordance with the Florida Limited Liability Company Act		
	0, 1, 10		
	Tabut Hallen		
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 Phillips		
	Typed or printed name of signee		

03/18/2011 14:45

(((H11000071992 3)))

#### 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:	
Gamut Properties, 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:	2011 1A15
National Corporate Research, Ltd., Inc.	
(Name) 515 East Park Avenue	FILE 2011 HAR 18 AV 2012 HAR 18 AV 2012 HAR 18 AV
Florida Street Address (P.O. Box NOT ACCEPTABLE)	AM 9: 43 DE STATE SELORIDA
Tallahassee, <sub>FL</sub> 32301	<b>5</b> ₩ <b>5</b>
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)

Certificate of Status (optional) 5.00

(((H110000719923)))

# STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greetings:

I, Charles P. White, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

#### **GAMUT PROPERTIES, LLC**

duly filed the requisite documents to commence business activities under the laws of State of Indiana on February 54, 2011, and was in existence or authorized to transact business in the State of Indiana on March 18, 2011.

I further certify this Domestic Limited Liability Company (LLC) has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Eighteenth Day of March, 2011.

Charles P. White, Secretary of State

2011021600094 / 2011031881678