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DEFARTMENT OF STATE DIVISION OF CORPORATIONS TALLAMASSEE, FLORIDA RECEIVED

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EXAMINER

SECRETARY OF STATE OF CORPORATION OF CORPORATION

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

04-01-11

NAME: S.N. PHELPS REALTY LLC

TYPE OF FILING: APPLICATION BY FOREIGN LLC TO TRANSACT

BUSINESS IN FLORIDA

COST:

\$155

RETURN: CERTIFIED COPY

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HO

COVER LETTER

	Name of Limited Liability Company
ne enclosed "Application by Foreign Limited distence, and check are submitted to register to	Liability Company for Authorization to Transact Business in Florida," Certificate of the above referenced foreign limited liability company to transact business in Florida
ease return all correspondence concerning thi	s matter to the following:
Amy Pomeroy	
	Name of Person
Clear Springs Enterpris	ses, LLC
<u> </u>	Firm/Company
P.O. Box 1070	
_ 	Address
Bartow, FL 33831	
	City/State and Zip Code
Apome26672@aol.	COM ss: (to be used for future annual report notification)
r further information concerning this matter,	
Amy Pomeroy	at (863) 534-1292
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 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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:

S. N. Phelps Realty L.L.C. (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
f name unavailable, enter alternate name adopted for the purpose of transacting business in Piorida and attach a copy of the written of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability ompany," "L.L.C," "LLC,")
Delaware 3.
(Jurisdiction under the law of which foreign limited liability (FBI number, if applicable) company is organized)
April 22, 1994 5, Perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
Upon filing
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
8 Soundshore Drive, Suite 285
Greenwich, CT 06830 (Street Address of Principal Office)
(Street Address of Philopal Office)
If limited liability company is a manager-managed company, check here
The name and usual business addresses of the managing members or managers are as follows:
Stanford N. Phelps
8 Soundshore Drive, Suite 285
Greenwich, CT 06830
 Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records e jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a usuation of the certificate under eath of the translator must be submitted.)
. Nature of business or purposes to be conducted or promoted in Florida: Real Estate
Lango & Thelps
Signature of apprember or an authorized representative of a member.
(In accordance with section 603.408(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.)
Stanford N. Phelps

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.

1. The name of the Limited Liability Company is:
S. N. Phelps Realty L.L.C.
If unevaluable, the alternate to be used in the state of Florida is:
2. The name and the Plorida street address of the registered agent and office are:
Army Pomeroy
(Name)
6105 Spirit Lake Road
Florida Street Address (P.O. Box. NOT ACCEPTABLE)
Winter Haven Rt. 33880
City/State/Zip
Elaving 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-ya registered agent as provided for in Chapter 608, Florida Statutes. (Elgnature)
\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.60 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "S. N. PHELPS REALTY L.L.C." IS DULY
FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD
STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS
OFFICE SHOW, AS OF THE THIRTY-FIRST DAY OF MARCH, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "S. N. PHELPS REALTY L.L.C." WAS FORMED ON THE TWENTY-SECOND DAY OF APRIL,

A.D. 1994.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

2397065 8300

110366168

DATE: 03-31-11

You may verify this certificate online at corp. delevere, gov/suthver. shtml