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(Bu	isiness Entity Nar	ne)
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Special Instructions to	Filing Officer:	
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Office Use Only

707-W11000027046



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06/06/11--01003--016 \*\*130.00

05/13/11--01023--012 \*\*87.50



D. BRUCE

JUN 1 3 2011

**EXAMINER** 



June 6, 2011

LARRY EASON 1610 SAND HOLLOW LANE PALM HARBOR, FL 34683

SUBJECT: LCT ASSOCIATES LLC Ref. Number: W11000027046

We have received your document for LCT ASSOCIATES LLC and your check(s) totaling \$217.50. 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.

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) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 911A00013806





#### FLORIDA DEPARTMENT OF STATE Division of Corporations

May 16, 2011

LARRY EASON 1610 SAND HOLLOW LANE PALM HARBOR, FL 34683

SUBJECT: LCT ASSOCIATES LLC

Ref. Number: W11000027046



We have received your document for LCT ASSOCIATES LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return the corrected original and one copy of 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) 245-6973.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 211A00012106

NECEIVED OF SIAN

www.sunbiz.org

### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: LCT Advocates LLC  Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.
Please return all correspondence concerning this matter to the following:
Larry Eason
Name of Person
Firm/Company
1610 Sand Hallow Lane
Address  Palm Harbor, FL 34683  City/State and Zip Code
LANTY CASON O SPYICON - SPRVICE. Con E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person Area Code & Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314  STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount:  \$\int_{\text{S125.00 Filing Fee}} \int_{\text{S130.00 Filing Fee}} \text{\$\text{S130.00 Filing Fee} & Certificate of Status} \int_{\text{Certified Copy}} \int_{\text{S160.00 Filing Fee}} \text{\$\text{Certified Copy}} \text{\$\text{Certified Copy}} \text{\$\text{Certified Copy}} \text{\$\text{Certified Copy}} \text{\$\text{Certified Copy}} \$\text{Certified C

# 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:
BCT Assessta 110
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(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. (Jurisdiction under the law of which foreign limited liability 3. (FEI number, if applicable)
company is organized)
4. 7/22/0-9 (Date of Organization)  5. Dee pellical (Duration: Pear limited liability company will cease to
(Date of Organization) (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)
1/1/0 Sand Hollow Land &
(Street Address of Principal Office)
(Street Address of Frincipal 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:
for the final distribution and distributions and distributions of the final distribution of the
parry baso - Operating Manage Include
Vicia Cashman Sasca Jerretar
Lucia Ca O Walley of Party to Al
_ 1410 Sand Hallow Sang Palm Harte Fl
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: Semicon - Service
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

## 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:	
LCT Associates LIC	
If unavailable, the alternate to be used in the state of Florida is:	
Semicon Service	
2. The name and the Florida street address of the registered agent and office are:	
Harry Sasa (Name)	اع نعه
O (Name)	
1610 Sand Hallow Land	L
Florida Street Address (P.O. Box NOT ACCEPTABLE)	C
Palm Halva FL 34683	
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 registere 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.	ed .
(Signature)	
\$ 100.00 Filing Fee for Application	

Designation of Registered Agent

**Certificate of Status (optional)** 

**Certified Copy (optional)** 

\$ 25.00

\$ 30.00

5.00

Corporations Section: P.O.Box 13697 Austin, Texas 78711-3697



## Office of the Secretary of State

#### Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for LCT Associates, LLC (file number 801150675), a Domestic Limited Liability Company (LLC), was filed in this office on July 23, 2009.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hercunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on June 10, 2011.



Hope Andrade Secretary of State

TID: 10264

Dial: 7-1-1 for Relay Services Document: 371806770002