

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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From:

Account Name : ADVOCATE CONSULTING LEGAL GROUP, PLLC

Account Number : I20090000001 Phone : (239)213-0066 : (239)213-0698

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Foreign Limited Liability Company AUTOMATED BUSINESS LOGIC, LLC

Certificate of Status	0
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EXAMINER

8/9/2011

ADVOCATE CONSULTING Fax: 239+213+0698

Aug 9 2011 02:22pm P002/005

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COVER LETTER

	tration Section on of Corporations				
SUBJECT:	AUTOMATED BUSINESS LOGIC				
	Nan	ne of Limited Liability Company			
Existence, and	check are submitted to register th	bility Company for Authorization to Transact Busines a above referenced foreign limited liability company	ss in Florida," Certi to transact busine	ificate of ss in Floric	da.
Please return al	I correspondence concerning this	matter to the following:			
	RACHEL HALL				
•	1.4.4.1.18.11.12.F	Name of Person			
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	RACHELH@ADVOCATETAX.	ess: (to be used for future annual report notification)		9	
	E-man addre	sa, to be used for locate analysis report notifications	تخند		
For further infor	mation concerning this matter, ple	ase call:			
RACH	EL HALL	at (239) 213-0066			
	Name of Person	Area Code & Daytime Telephone Number			
MAILI	NG ADDRESS:	STREET ADDRESS:			
Divisio	n of Corporations	Division of Corporations			
Regist	ration Section	Registration Section			
	ox 6327	Clifton Building			
Tallaha	assee, FL 32314	2661 Executive Center Ctrole Tallahassee, FL 32301			
Enclosed is a	check for the following am	ount:			
	25.00 Filing Fee \$130.00 Fill Certificate	ing Fee & \$155.00 Filing Fee & :	\$160.00 Filing Fee of Status & Certifie		e

Fax: 239+213+0698

Aug 9 2011 02:22pm P003/005

ATX1

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:

1	AUTOMATED BUSINESS LOGIC, LLC	 -					
	(Name of Foreign Limited Liability Company; must inc	lude "L	imited Liability Company," "L.L.С.,"	or "LLC.")			
WT	name unavailable, enter alternate name adopted for the purpor tten consent of the managers or managing members adopting mited Liability Company," "L.L.C.," "LLC.")	se of the	ansacting business in Florida and a emate name. The alternate name m	itach a cop ust include	ay of the		
2.	. DELAWARE	3.	45-2933341				
	(Jurisdiction under the law of which foreign limited liability company is organized)	-		(FEI number, if applicable)			
4.		5.					
	(Date of Organization)		(Duration: Year limited liability cor exist or "perpetual")	oration: Year limited liability company will cease to rist or "perpetual")			
6.		8/2011					
	(Date first transacted business (See sections 608.501 & 608.50						
7.	3073 HORSESHOE DR S STE 210			三年			
•	SOFO THE BIT O OTE 210			5	AUG		
	NAPLES, FL 34104			>	<u>ç</u> 5	L Finite	
	(Street Address	of Prin	ncipal Office)	C.3 -	Q)	
a	8. If limited liability company is a manager-managed company, check here		ار 2 ₄₀ آ	3	er er er g - \$ græner		
	The name and usual business addresses of the manage	•			8:47	A caures	
	JONATHAN S. LEVY						
	3073 HORSESHOE DR S STE 210						
	NAPLES, FL 34104						
cus	Attached is an original certificate of existence, no more stody of records in the jurisdiction under the law of which tificate is in a foreign language, a translation of the certificate is in a foreign language. Attantion of the certificate is in a foreign language.	it is or cate u	ganized. (A photocopy is not accorder cath of the translator must be	eptable. It se submit	f the	ng	
		,,,,,,,					
	(A) 2						
	Signature of a member or an au						
	(In accordance with section 508,408(3), F.S., the exe penalties of perjury that the facts stated herein are				J		
	document to the Department of State constitutes						
	JONATHAN S. LEVY	•					
	Typed or print	ted na	ime of signee				

Aug 9 2011 02:23pm P004/005

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45-2933341

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.

∴15. The i	name of the Limited Liability Compan	y is:			
AUTOMATE	D BUSINESS LOGIC, LLC			_	
If unavaila	ble, the alternate to be used in the si	tate of Florida is:		-	
·				_	
2. The	name and the Florida street address o	of the registered agent and office are:	TALLAH	11 AUG	·***
	JONATHAN S. LEVY		<u> </u>	1	ية بيف دة دسوره
No. of the Property of the Pro	JOHN MAN G. ELVI	(Name)		9 &3	1 mg
•	3073 HORSESHOE DR S STE 210	3	STATE	÷:	-,1
		ress (P.O. Box <u>NOT</u> ACCEPTABLE)	TDA	Ţ., 7	
	NAPLES	FL 34104			
		City/State/Zip	_		
company a agree to ac and comple	t the place designated in this certificate, I t in this capacity. I further agree to comp ete performance of my duties, and I am fa agent as provided for in Chapter 608, Flo		d agent a to the proj	nd per	
-	// Sign	ature)			
	\$ 100.00	Filing Fee for Application			
	\$ 25.00	Designation of Registered Agent			
	·	Certified Copy (optional) Certificate of Status (optional)			
	\$ 0 ,00	vermicate or vierse (obrioner)			

ADVOCATE CONSULTING Fax: 239+213+0698

Aug 9 2011 02:23pm P005/005

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Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AUTOMATED BUSINESS LOGIC, LLC" IS DULY FORMED UNDER THE LANS 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 FOURTH DAY OF AUGUST, A.D. 2011.

5020673 8300

You may varify this certificate online at corp. delaware.gov/authver.shtml

AUTHENT CATION: 8950718

DATE: 08-04-11

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