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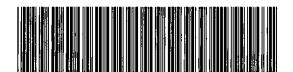
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**EXAMINER** 



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Filing and Recording of Documents	Date:	July 12, 2011	Our File Number
RE: LDC Group, LLC	· · · · · · · · · · · · · · · · · · ·		
The following document(s) are enclosed:		Please return file-ma	arked copies to us.
Application for		Please enter date of	f filing and return this form to
Certificate of Authority	_	us by	, 2011
		Charge our account Below	for fees. See Visa Instructions
	x	Check enclosed to o	cover fees \$125.00
TO: Florida Department of State Registration Section Division of Corporations PO Box 6327 Tallahassee, FL 32314		NOWALSKY, BRON ATTO 1420 VETER METAIRI	O: ROLINE PAYS ISTON & GOTHARD, A.P.L.L.C. DRNEYS AT LAW ANS MEMORIAL BLVD. E, LOUISIANA 70005 832-1984 FAX: (504) 831-0892
滑りた wing	<b>⊢</b>		

#### **COVER LETTER**

		Name of Limited Liability Company
losed "Appli	cation by Foreign Limited I	Liability Company for Authorization to Transact Business in Florida," C
e, and check	are submitted to register th	ne above referenced foreign limited liability company to transact busines
eturn all corr	espondence concerning this	s matter to the following:
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Ca	roline Pays	N CD
		Name of Person
No	walsky, Bronston & G	othard, APLLC
		Firm/Company
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	20 Veterans Memoriai	Address
Me	etairie, LA 70005	
		City/State and Zip Code
сра	ays@nbglaw.com	
	E-mail address	s: (to be used for future annual report notification)
ner information	on concerning this matter, p	please call:
Caroline P	ขพร	st (504 ) 832-1984
	Name of Person	Area Code & Daytime Telephone Number
MAILING	ADDRESS:	STREET ADDRESS:
Division of	Corporations	Division of Corporations
Registration P.O. Box 63		Registration Section Clifton Building
Tallahassee,		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:

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. LDC Group, LLC
(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. New York 3. n/a
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
1/21/11 5 perpetual
(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)
7. 1 Expressway Plaza, Suite 114
Roslyn Heights, NY 11577
(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:  Valerie Lavino, 1 Expressway Plaza, Suite 114, Roslyn Heights, NY 11577
Lisa Rossi, 1 Expressway Plaza, Suite 114, Roslyn Heights, NY 11577
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 ranslation of the certificate under oath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: \( \( \int \text{POUP} \) \( \int \text{CC} \).
To provide local or long distance telephone service
· Pasa Rossi
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.)
Lish Rossi

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 nam	ne of the Limited Liability (	Company is:				
LDC Grou	p, LLC					
If unavailable, the alternate to be used in the state of Florida is:						
2. The nam	ne and the Florida street add	dress of the registered agent and office are:				
	Corporation Service Co	ompany				
		(Name)				
•	1201 Hays Street					
	Florida Stree	et Address (P.O. Box NOT ACCEPTABLE)				
	Tallahassee	FL 32301				
		City/State/Zip				
liability con agent and a relating to t	npany at the place designated agree to act in this capacity. The proper and complete perf of my position as registered Corporation Service Co					
	By arquelin	(Signature) Jacqueline N. Casper, Assistant VP				
	0	(Signature) Jacqueline N. Casper, Assistant VP				
	\$ 2	90.00 Filing Fee for Application 95.00 Designation of Registered Agent 90.00 Certified Copy (optional)				

5.00 Certificate of Status (optional)

## State of New York Department of State } ss

I hereby certify, that LDC GROUP, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 01/21/2011, 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 12th day of July two thousand and eleven.

Daniel Shapiro

First Deputy Secretary of State

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