# MIN0005003

·
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to 7 mily officer.
101100050025

Office Use Only



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D. BRUCE

OCT 5 2011

**EXAMINER** 



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

September 29, 2011

STEVEN FOSSE 17033 SE 115TH TERRACE RD SUMMERFIELD, FL 34491

SUBJECT: FOSSE AT HOME LLC Ref. Number: W11000050025

11 OCT -4 PM 3: 46
ALLAHASSEF, FLORIDA

We have received your document for FOSSE AT HOME LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the name, title, and business address of each managing member or manager who will manage the foreign limited liability company in the state of Florida. Please insert "MGRM" in the title portion for each managing member and "MGR" in the title portion for each manager.

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: 311A00022492

### **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Fosse at Home LLC  Name of Limited Liability Company		
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Existence, and check are submitted to register the above referenced foreign limited liability company to transact busin	Certit	ficate of Florida
Please return all correspondence concerning this matter to the following:		
Steven Fosse Name of Person		
Fosse at Home LLC		
Firm/Company		
17033 SE 115th Terrace Rd		
Address	1 00	tra, ja
Summerfield, FL 34491	1	Constant Con
els3@lightningspeed.net  E-mail address: (to be used for future annual report notification)	65 叠 1	
For further information concerning this matter, please call:	ο <i>ι</i> τ.	
Steven Fosse at (352) 245-8989  Name of Person Area Code & Daytime Telephone Number		
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301		
Enclosed is a check for the following amount:  \$\int\\$\$125.00 \text{ Filing Fee} \text{\$\sum_{\text{Certificate of Status}}\$\$\$ Certificate of Status \text{\$\sum_{\text{Certified Copy}}\$}\$\$\$\$\$\$ \$155.00 \text{ Filing Fee & Certified Copy}\$\$\$\$ Certified Copy	te	

## 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:

(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. Pennsylvania 3. 27-2264714
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4. March 18, 2010 5. perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
5
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 17033 SE 115th Terrace Rd
Summerfield, FL 34491
(Street Address of Principal Office)
3. If limited liability company is a manager-managed company, check here
P. The name and usual business addresses of the managing members or managers are as follows:
Steven Fosse MGRM
17033 SE 115 Terr Rd
Summerfield, FL 34491
0. 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.)
1. Nature of business or purposes to be conducted or promoted in Florida: research/marketing
Sheren An
Signature of a member or an authorized representative of a member.

Typed or printed name of signee

Steven Fosse

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.)

## 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:			
Fosse at Home 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:			-
Steven Fosse	IAL IAL	=======================================	
(Name)	CAH AH	8	th.r
17033 SE 115th Terr Rd	IAR ASS	<u>-</u>	**************************************
Florida Street Address (P.O. Box NOT ACCEPTABLE)	. EE' A Gi	<u></u>	
Summerfield FL City/State/Zip	STATE	3:45	
	÷.		

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)
\$ 5.00 Certificate of Status (optional)

## COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

**OCTOBER 3, 2011** 

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

#### Fosse at Home LLC

is duly organized as a Pennsylvania Limited Liability Company under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT, This Subsistence Certificate shall not imply that all fees, taxes, and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Secretary of the Commonwealth

Certification Number: 9819874-1

Verify this certificate online at http://www.corporations.state.pa.us/corp/soskb/verify.asp