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EXAMINER

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#### Foreign Limited Liability Company PKS ADVISORY SERVICES, LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$125.00

### COVER LETTER

UBJECT: 1	KS Advisory Services, LLC	Name of Limited Liability Company
		ed Liability Company for Authorization to Transact Business in Florida," Certificate of er the above referenced foreign fimited liability company to transact business in Florida.
sase rehim a	Il correspondence concerning	this matter to the following:
	Modesto Lugo	
		Name of Person
•	PKS Advisory Services, L1	C Firm/Company
		runot.oppany
	18 Corporate Woods Blvd	Address
	Albuny, NY 12211	
		City/State and Zip Code
	mlugo@pksinvest.com, km	itos@pksinvest.com dress: (to be used for future annual report notification)
or further inf	ormation concerning this matter	
Mode	sto Lugo	at (518 ) 436-3536  Area Code & Daytime Telephone Number
	Name of Person	Area Code & Daytimo Telephone Number
Divis Regis P.O. I	LING ADDRESS; ion of Corporations tration Section 30x 6327 nassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
	a check for the following 00 Filing Fee \$\int 3130.00 File Certificate	iling Fee & [\$155.00 Filing Fee & [\$160.00 Filing Fee, Certificate] -

STATE FLORIDA

## 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:

TIMITED PRUMPILLI COMBANAL FOLIMANACI DOMANZA NA	CHE STATE OF PLOKEDE:
1. PKS Advisory Services, LLC (Name of Foreign Limited Liability Company; must)	include "Limited Liability Company," "L.L.C.," or "LLC.")
	urpose of transacting business in Florida and attach a copy of the written alternate name. The alternate name must include "Limited Liability
2. New York	3. 14-1836183
(Jurisdiction under the law of which foreign limited limbil company is organized)	(FEI number, if applicable)
4. 10/12/2001	5. N/A
(Date of Organization)	(Duration: Year limited liability compuny will conse to exist or "perpetual")
6, N/A	
(1)ate first transacted business i	n Florida, if prior to registration.) F.S. to determine penalty liability)
7	
18 Corporate Woods Blvd, Albany, NY 12211	ross of Principal Office)
(Subst Not	ress of Principal Office)
8. If limited liability company is a manager-mana	ged company, check here 🔀
9. The name and usual business addresses of the r	managing members or managers are as follows:
Keith O. Flood	
	a 90 days old, duly authenticated by the official having custody of records in ecopy is not acceptable. If the certificate is in a foreign language, a submitted.)
11. Nature of business or purposes to be conducte	d or promoted in Florida;
Registered Investment Advisory Pirm	
Bert 10.	Hand
	authorized representative of a member.
(In accordance with section 608.408(3), F.S., the	execution of this document constitutes an affirmation under the
pomittles of perjury that the facts stated herein a document to the Department of State consti-	re true. I am aware that any fulse information submitted in a tutes a third degree folony as provided for in s.817,155, F.S.)
Keith O. Flood	
Typed or prin	nted 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:
PKS Advisory	Services, LLC	
If unavailable	e, the alternate to be used	d in the state of Florida is:
2. The name	and the Florida street ac	dress of the registered agent and office are:
	C T Corporation System	
	Technic was a province of the second specific and the second specific speci	(Name)
	1200 South Pine Island Re	บลเ
	· Florida Str	cet Address (P.O. flox NOT ACCEPTABLE)
	Pluntation -	FL 33324
		City/State/Zip
liability compagent and agr relating to the	ony at the place designatese to act in this capacity, a proper and complete per finy position as registered CT Corporation	at and to accept service of process for the above stated limited ed in this certificate, I hereby accept the appointment as registered I further agree to comply with the provisions of all statutes of my duties, and I am familiar with and accept the diagent as provided for in Chapter 608, Florida Statutes.  ASSISTANT SECRETARY  (Signature)
	\$ :	00.00 Filing Fee for Application 25.00 Designation of Registered Agent 30.00 Certified Copy (optional) 5.00 Certificate of Status (optional)

# State of New York Department of State ss

I hereby certify, that PKS ADVISORY SERVICES, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 10/12/2001, 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 25th day of October two thousand and eleven.

Daniel Shapiro

First Deputy Secretary of State

201110260469 \* EZ