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COVER LETTER

TO: New Filing Section Division of Corporations			
SUBJECT: Prime Legacy Management, LCC			
Name of corporation - must include suffix			
Dear Sir or Madam:			
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.			
Please return all correspondence concerning this matter to the following:			
Michael N. Schneider, Esq.			
Name of Person			
Ansbacher & Schneider, P.A.			
Firm/Company			
5150 Belfort Rd., Bldg. 100			
Address			
Jacksonville, FL 32256			
City/State and Zip code			
aardito@jaxlaw.com E-mail address: (to be used for future annual report notification)			
E-man address. (to be used for future aimual report notification)			
For further information concerning this matter, please call:			
Alma_Ardito at (904) 296-0100			
Name of Person Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building Clother Circle Tallahassee, FL 32301 MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			
Enclosed is a check for the following amount:			
\$70.00 Filing Fee & S78.75 Filing Fee & Certificate of Status Certified Copy S87.50 Filing Fee, Certified Copy			

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: Prime Legacy Management, 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. Delaware (Jurisdiction under the law of which foreign limited liability company is organized) 4. September 22, 2008 Perpetual (Duration: Year limited liability company will cease to (Date of Organization) exist or "perpetual") 6. N/A (Date first transacted business in Florida, if prior to registration. (See sections 608.501 & 608.502 F.S. to determine penalty liability) 1225 N. Broad Street, Suite 2 West Deptford, NJ 08096 (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: John M. Paz, c/o Prime Legacy Management, LLC 1225 N. Broad Stret, Suite 2 West Deptford, NJ 08096 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: Real Estate Management pagement, LLC 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:		
Prime Legacy Management, 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:	SECRE	2 8 m
C T Corporation System	TANK T	7 7
(Name)	FO	7 E
1200 South Pine Island Road	SI A	ភូ
Florida Street Address (P.O. Box NOT ACCEPTABLE)	9 77	웃
	: •	
Plantation FL 33324		
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 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.

Special Assistant Secretary

(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)

5.00 Certificate of Status (optional)

Delaware

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PRIME LEGACY MANAGEMENT, LLC" IS DULY FORMED UNDER THE LAWS 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 ELEVENTH DAY OF OCTOBER, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PRIME LEGACY MANAGEMENT, LLC" WAS FORMED ON THE TWENTY-SECOND DAY OF SEPTEMBER, A.D. 2008.

DATE: 10-11-11

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