Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617~6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Fax Number

: (850)222-1092 : (850)878-5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Emmil	Addrose	

### Foreign Limited Liability Company Pendo Management, LLC

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

J. SAULSBERRY EXAMINER

NOV 1 5 2011

#### COVER LETTER

GU0319011 227	ndo Management, LLC	Name of Limited Liability Company	<del></del>
The enclosed "A	unlication by Foreign Limited	Liability Company for Authorization to Transact Busines	ss in Florida." Certificate of
Existence, and cl	heck are submitted to register	the above referenced foreign limited fiability company to	transact business in Florida
Please return all	correspondence concerning th	is matter to the following:	
	Michael Pe	eck	
	The second secon	Nume of Person	
	Pendo Mana	gement, LLC	
	or treatment at the state of th	Pirm/Compuny	70 FA
	2732 SW Arthur Drive		
		Address	2011 NOV 14 SECRETAR SALLAHASS
	Lee's Summ	nit, MO 64082	II.
	······································	City/State and Zip Code	
		and the second s	- 1 9: 0:
•	B-nual addre	partners@pendomanagement.com sss: (to be used for future annual report autification)	<del></del>
None Combine inform	nation concerning this matter,	ninoa autr	, > <u> </u>
ror turner more	nation concerning this number,	presse curt.	
		ai ( )	
· · · · · · · · · · · · · · · · · · ·	Name of Person	Area Code & Daytime Telephone Number	V
	NG ADDRESS:	STREET ADDRESS:	
	of Corporations	Division of Corporations	
	tion Section	Registration Section	
P.O. Bo.		Clifton Building	
Tallabas	see, FL 32314	2661 Executive Center Circle	
		Tallahassee, FL 32301	

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Pendo Management, LLC     (Name of Foreign United Liability Company; must	t include "Limited Liability Company." "L.L.C.," or "LLC.")	<del></del>
(If name unavailable, enter alternate name adopted for the p	purpose of transacting business in Florida and attach a copy of	f the written
consent of the managers or managing members adopting the Company," "L.L.C." "L.L.C."	e alternate name. The alternate name must include "Limitett t	Liubility
Missouri Hunsdiction under the law of which foreign limited liabs company is organized)	3. 27-1216278 (FEI number, if applicable)	
4. 10/28/2009 (Date of Organization)	5. Perpetual  (Duration: Year limited liability company will ceus exist or "perpetual")	
6. Upon Qualification	·	) 2
	in Florida, if prior to registration.)  2 F.S. to determine penalty flability)	AL AON
7. 2732 SW Arthur Drive, Lee's Summit, MO 64082	ري. نان	<i>≒</i>
		C) III
(Street Add		9:0 9:0
8. If limited liability company is a manager-mana		07
9. The name and usual business addresses of the i	managing members or managers are as follows:	
Michael Peck, 2732 SW Arthur Dr. Lee's Summit, MO	O 64082	
Jettrev Saudman, 3209 W 77th Street, Prairie Village,	KS 66208	<del></del> .
	on 90 days old, duly authenticated by the official having custody o tocopy is not acceptable. If the certificate is in a foreign language a submitted.)	
11. Nature of business or purposes to be conducte	ed or promoted in Florida:	
Appraisal Management Company		
11(0)		
Signature of a member or ac	in authorized representative of a member.	
(In accordance with section 608.408(3), F.S., the penalties of perjury that the facts stated herein a	e execution of this document constitutes an affirmation under the are true. I am aware that any false information submitted in a finites a third degree felony as provided for in s.817.155, F.S.)	ı
	Michael Peck	
Typed or prin	inted 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.

	agement, LLC	any is:	
If unavailable,	the alternate to be used in the	state of Florida is:	
2. The name ar	nd the Florida street address o	of the registered agent and office	are;
	СТ	Corporation System	2011 SETALI
		(Name)	ARE NO
	1200 S	outh Pine Island Road	2011 NOV 14 SECRETARY
	Florida Street Address (P.O. Box NOT ACCEPTABLE)		
	Plantation	FL 33324	AM 9: 07
		City/State/Zip	) A
liability compan agent and agree relating to the pi obligations of m	y at the place designated in th to act in this capacity. I furth roper and complete performan y position as registered agent	o accept service of process for the is certificate, I hereby accept the ter agree to comply with the provice of my duties, and I am familia as provided for in Chapter 608, I	appointment as registered isions of all statutes ir with and accept the
By: Nother of	orporation System		
701/01/01	(Signature) \ ackey, Asst. Secy.		
	\$ 100.00	Filing Fee for Application	
	\$ 25.00	Designation of Registered Ag	ent

\$ 30.00 Certified Copy (optional)

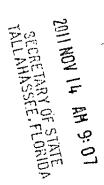
Certificate of Status (optional)

\$ 5.00

# STATE OF MISSOURI



Robin Carnahan Secretary of State



# CORPORATION DIVISION CERTIFICATE OF GOOD STANDING

I, ROBIN CARNAHAN, Secretary of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

#### PENDO MANAGEMENT, LLC LC1006935

was created under the laws of this State on the 28th day of October, 2009, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 14th day of November, 2011

n amelian

Secretary of State

Certification Number: 14312740-1 Reference:

Verify this certificate online at https://www.scs.mo.gov/businessentity/soskb/verify.asp