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COVER LETTER

_	on of Corporations			
SUBJECT:	Chalse Inve	stors Portfo	lio Ls.	76.1
i,i		of Limited Liability Compan	y	
The enclosed "A Existence, and c	Application by Foreign Limited Liabilit check are submitted to register the above	y Company for Authorization e referenced foreign limited	n to Transact Business in Florida," Ce liability company to transact business	rtificate of
lease return all	correspondence concerning this matter	to the following:	:	
	Alexan	dria Hall Name of Person		n 3s
		Name of Ferson	•	•
	Financial A	Firm/Company	ca UC	·. ·
	113 Backs	dale Peofess	sional Ctr.	., ;
1.4. 	Newark	De 19711 City/State and Zip Code		
,	Into finan	valassets of Arree e used for future annual repo	ica @ g mail.com	! .
12		·	nt nomication)	
or further infor	rmation concerning this matter, please of	call:		
<u>_</u>	lexandeig Hall	at (_305)_	343-4567	•
	Name of Person	Area Code & Daytime Tele	ephone Number	
Divisio Registr P.O. Bo	on of Corporations Examination Section Roox 6327	TREET ADDRESS: Division of Corporations egistration Section Elifton Building		,
Tallaha		661 Executive Center Circle allahassee, FL 32301		
	check for the following amount: 0 Filing Fee \$\int_\$\$\$\$\$\$130.00 Filing Fee & Certificate of Status		\$160.00 Filing Fee, Certificate of Status & Certified Copy	
* <u>*</u>				

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

	COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A MITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	FOREIGI ·
ι.	Chalse Invotes Poetfolio LCC. (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	_
col	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the sent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Lia Impany," "L.L.C," "LLC.")	
2.	Delawire (Jurisdiction under the law of which foreign limited liability company is organized) 3. 32-0367171 (FEI number, if applicable)	
	Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease t 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.	113 Backsdate Professional GTR Newber DE 19	<u> H</u> I
	(Street Address of Principal Office)	
8.	If limited liability company is a manager-managed company, check here	w 5.,
9.	The name and usual business addresses of the managing members or managers are as follows:	
	Alexandeia Hall	<u>3</u>
		1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
	の : * C : ** C) Winne
the	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody at jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign and under one of the translator must be submitted.)	
11	. Nature of business or purposes to be conducted or promoted in Florida:	_
	Real Estate Transactions	·
	Obyondair Hall	
	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.)	
	Alexandria Hall	
	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:
Chalse Investors Portfolio 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:
and the second s
Alexandeia Hall
(Name)
444 Brickell Avenue # 51-471
Florida Street Address (P.O. Box NOT ACCEPTABLE)
Fioritia Street Address (F.O. Box NOT ACCEPTABLE)
Mami FL 33131 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.
II
Clayardin Hall (Signature)
(Signature)
•
\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Degistered Agent

Certified Copy (optional)

Certificate of Status (optional)

\$ 30.00

5.00

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "CHALSE INVESTORS PORTFOLIO 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 JANUARY, A.D. 2012.

5093438 8300

120031863

AUTHENTY CATION: 9289665

DATE: 01-11-12

You may verify this certificate online at corp.delaware.gov/authver.shtml