#438 P.001/004

Division Conforming Conforming Conforming State

Florida Department of State

Page 1 of 1

Division of Corporations

Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : NATIONAL CORPORATE RESEARCH, LT

Account Number : 120000000088 Phone : (800)221-0102

Fax Number : (800) 944-6607

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

Ema	i	1	Address	:	

Foreign Limited Liability Company ACUITY NATIONAL REAL ESTATE SOLUTIONS LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

C. LEWIS

FEB 1 3 2012

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

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https://efile.sunbiz.org/scripts/efilcovr.exe

2/9/2012

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

IN COMPLIANCE WITH SECTION 60R503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE S.	
Acuity National Real Estate Solut (Name of Foreign Limited Liability Company; must include	tions / LLC "Limited Liability Company," "L.L.C.," or "LLC.")
,	
(If name unavailable, enter alternate name adopted for the purpose consent of the trunagers or managing members adopting the alternation company," "L. L.C." "LLC.")	of transacting business in Florida and attach a copy of the written ate name. The alternate name must include "Limited Liability
2. Delaware 3.	45-2933959
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4 July 28. 2011 5.	Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6. Upon qualification	FALL SE
(Date first transacted business in Flori (See sections 608.501 & 608.502 F.S. to	determine penalty liability)
7. 1275 Glenlivet Drive Suite 10	
Allentown, PA 18106	SEE O
(Street Address of	Principal Office)
8. If limited liability company is a manager-managed co	ompany, check here
9. The name and usual business addresses of the manag	ing members or managers are as follows:
Shawn Freibert 9500 Ormsby Station	Road, Suite 301 Louisville, KY 40223
Dennis Mattingly 9500 Ormsby Sta	tion Road, Suite 301
Louisville, KY 40223	
10. Attached is an original octificate of existence, no more than 90 day the jurisdiction under the law of which it is organized. (A photocopy is translation of the certificate under eath of the translation must be submit	snot acceptable. If the certificate is in a foreign language, a
11. Nature of business or purposes to be conducted or p	romoted in Florida:
Title and escrow services and all	other activities allowed by law
$\leq 10^{\circ}$	
Signature of a member or an jurthe	orized representative of a member,
	on of this document constitutes as affirmation under the I am aware that any false information submitted in a third degree felony as provided for in s.817.155, F.S.)
SHAWN K A	CETBERT
Typed or printed n	ame of signee

(((H120000355273)))

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.

Aculty Nation	nal Real Estate Solutions LLC	
If unavailable, the alternate to be used in	the state of Florida is:	
2. The name and the Florida street address	ss of the registered agent and office arc:	
•	F _c	2012 FEB
National C	Corporate Research, Ltd., Inc.	-19
	±m	5 55
	>=====================================	
11	55 Office Plaza Drive	-
	55 Office Plaza Drive Address (P.O. Box NOT ACCEPTABLE)	<u></u>
	55 Office Plaza Drive Address (P.O. Box NOT ACCEPTABLE)	= 0 A ±
	55 Office Plaza Drive	<u></u>

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) (((H120000355273)))

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "ACUITY NATIONAL REAL ESTATE

SOLUTIONS 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 SEVENTH DAY OF

FEBRUARY, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ACUITY NATIONAL REAL ESTATE SOLUTIONS LLC" WAS FORMED ON THE TWENTY-EIGHTH DAY OF JULY, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

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

AUTHENTICATION: 9348866

 \sim

DATE: 02-07-12

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