

Division of Corporations Electronic Filing Cover Sheet

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(((H12000031380 3)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

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From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

: (850)222-1092

Fax Number : (850)878-5368

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

Email Address:

Foreign Limited Liability Company SOC LLC d/b/a SOC Delaware LLC

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Electronic Filing Menu

Corporate Filing Menu

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2/6/2012

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CT CORPORATION

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February 7, 2012

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CT CORPORATION SYSTEM

SUBJECT: SOC DELAWARE LLC

REF: W12000007202

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

We need a "Written Consent to Adopt Alternate Name" form submitted with the Foreign Qualification document.,

If you have any questions concerning the filing of your document, please call (850) 245-6870.

Karen A Saly Regulatory Specialist II FAX Aud. #: H12000031380 Letter Number: 012A00004973

12 FEB 16 AM 9: 4.1 SECRETARYEDE STATE

P.O BOX 6327 - Tallahassee, Florida 32314

COVER LETTER

	Registration Section Division of Corporations	
SUBJEC		
	Nar	ne of Limited Liability Company
The enclo Existence	sed "Application by Foreign Limited Liab , and check are submitted to register the al	ility Company for Authorization to Transact Business in Florida," Certificate of cove referenced foreign limited liability company to transact business in Florida
Please ret	urn all correspondence concerning this ma	tter to the following:
	Madeline Santiago	
		Name of Person
	Day & Zimmermann, Inc.	
		Firm/Company
	1500 Spring Garden Street, 10th F.	loor
		Address
	1500 Spring Garden Street, Philade	elphia, PA 19130
		City/State and Zip Code
	madeline, santiago@dayzim.co	ווֹכ
	E-mail address: (t	o be used for future annual report notification)
For furthe	r information concerning this matter, pleas	se call:
J.	Michael L. Littlejohn, Esquire	at (703) 955-5703
-	Name of Person	Area Code & Daytime Telophone Number
_	MAILING ADDRESS:	STREET ADDRESS:
	livision of Corporations egistration Section	Division of Corporations Registration Section
P	O. Box 6327	Clifton Building
1	alluhussee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301
Enclosed	is a check for the following amour	nt:
<u> </u>	125.00 Filing Fee \$130.00 Filing Per Curtificate of State	& \$\Bigcip\$155.00 Filing Fee & \$\Bigcip\$160.00 Filing Fee, Certificate

FLOST - 10/09/2010 C T System Online



CONSENT TO USE OF NAME

SOC LLC a Limited Lia	bility Company organiz	ed under the lav	s of the Stat
of <u>Delaware</u> , hereby	consents to the registr	ation of the trade	√alternate
name of SOC Southeast LLC	in the State of	Florida	by SOC
LLC.			
IN WITNESS WHEREOF, the eald	SOC LLC	has caused this	Consent to
be executed by its Manager and attested un	nder ite corporate seal	by its Secretary,	this
14thday ofFebruary	, 2012.		
	·		
	SOC LLC		
	By: Søhn C. DiMarco,	O, Ma_ Manager	<u>- J</u>
Attest:			

SOC | 1500 Spring Garden Street| Philadelphia, PA 19130 | t 215 299-8000 | soc-use coin

(Serporate Seal)

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 LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

SOCILLO	
(Name	of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
	rtheast LLC
nsent of the	vailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written e managers or managing members adopting the alternate name. The alternate name must include "Limited Liability L.L.C," "LLC.")
Delaware	a 54~19 78 879
Jurisdictio	on under the law of which foreign limited liability (FEI number, if applicable) s organized)
Novembe	5. Perpetual
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
January 2	012
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 P.S. to determine penalty liability)
1500 Spr	Inc Corden Street Obiledalphia DA 10130
	(Street Address of Principal Office)
	Fig. 6
	(Street Address of Principal Office)
If limite	d liability company is a manager-managed company, check here
Th	and usual business addresses of the managing members of managers are as follows:
i ne nan	ne and usual business addresses of the managing members or managers are as follows:
Day & 7	Simmermann, Inc 1500 Spring Garden Street, Philadelphia, PA 19130
Day & Z	ammemann, me 1500 Spring Gardan Succe, Frinadelpina, 17, 17150
4 1	
	Is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in a under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a
	the certificate under outh of the translator must be submitted.)
	of business or purposes to be conducted or promoted in Florida:
	at Services
Linication	at octytices
	Orta C. D. Mario A
	Signature of a member or an authorized representative of a member.
	(In accordance with section 608.408(3), P.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.)
	John C. DiMarco, Jr., President, Day & Zimmermann, Inc., Member
	Typed or printed name of signee .

FL057 - 10/05/2010 C T System Online

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 Lin	nited Liability Company is:			
SOC LLC doir	g business as SOC Southeast LLC			
If unavailable, the alternate to be used in the state of Florida is:				
2. The name and the FI	orida street address of the registered agent and office are:			
C T Corp	oration System			
	(Name)			
1200 Sou	th Pine Island Road			
	Florida Street Address (P.O. Box NOT ACCEPTABLE)			
Plantatio	n <u>FL</u> 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.

C T Corporation System

Waria T. Chambers

(Signature)

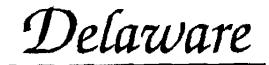
Maria T. Chambers

Special Assistant Secretary

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SOC 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 FIRST DAY OF FEBRUARY, A.D. 2012.

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

4456495 8300

120113643

You may verify this cartificate online

AUTHENTY CATTON: 9337131

DATE: 02-01-12

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