1112000002352

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Walkela				

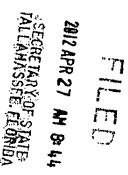
Office Use Only



900231460629

DEFENDENCE STATE

12 APN 27 AM 10: 48



J. SAULSBERRY EXAMINER APR 30 2012



ACCOUNT NO. : I2000000195

REFERENCE : 183436

7357072

AUTHORIZATION :

COST LIMIT :

ORDER DATE: April 26, 2012

ORDER TIME : 4:11 PM

ORDER NO. : 183436-005

CUSTOMER NO: 7357072

FOREIGN FILINGS

NAME:

LIPPER ADVISORY SUPPORT

SERVICES LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Becky Peirce -- EXT# 2919

EXAMINER:

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:

1.	Lipper Advisory Support Services LLC
	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
ÇO	f name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written onsent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability ompany," "L.L.C," "LLC.")
2.	Delaware 3 Applied For
	Delaware (Jurisdiction under the law of which foreign limited liability company is organized) Applied For (FEI number, if applicable)
4.	March 21, 2012 5 perpetual
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6.	N/A
٠.	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 8751 W. Broward Blvd., Ste 207
7.	8751 W. Broward Blvd., Ste 207
	Plantation, FL 33324
	(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:
	A. Michael Lipper, 85 Hobart Ave, Summit, New Jersey 07901
tlx	D. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in e-jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a unstation of the certificate under oath of the translator must be submitted.)
11	. Nature of business or purposes to be conducted or promoted in Florida: administrative support services
	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

Paul J. Freedman

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:		
Lipper Advisory Support Services 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:	2012	
Paul J. Freedman ≛	2	- n
(Name)	APR 27	=
8751 W. Broward Blvd., Ste 207	>	in
Florida Street Address (P.O. Box NOT ACCEPTABLE)	. 32 . 99 	O
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.

(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

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "LIPPER ADVISORY SUPPORT SERVICES

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 TWENTY-SIXTH DAY OF

APRIL, A.D. 2012.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LIPPER ADVISORY SUPPORT SERVICES LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF MARCH, A.D. 2012.

5127800 8300

120478810

Jeffrey W. Bullock, Secretary of State AUTHENTY CATION: 9532657

DATE: 04-26-12

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