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(Requestor's Name)				
(Address)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
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12 MAY 17 PH 2: 45

SECRETARY OF STATE DIVISION OF CONFORATIONS

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MAY 1 8 2012 T. HAMPTON

COVER LETTER

Registration Section

TO:

Division of Corporations
SUBJECT: Trial Assist, LLC
Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida
Please return all correspondence concerning this matter to the following:
Steven E. Paley
Name of Person
Trial Assist, LLC
Firm/Company
1920 Northgate Blvd. STE A9
Address
Sarasota, FL 34234
City/State and Zip Code
spaley@trialassist.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Steven E. Paley at (941) 201-1150
Name of Person Area Code & Daytime Telephone Number
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301
Enclosed is a check for the following amount: \$\Begin{align*} \pm



RECEIVED

12 MAY 17 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE Division of Corporations

April 25, 2012

STEVEN E PALEY TRIAL ASSIST, LLC 1920 NORTHGATE BLVD - STE A9 SARASOTA, FL 34234

SUBJECT: TRIAL ASSIST, LLC Ref. Number: W12000022849

We have received your document for TRIAL ASSIST, LLC and your check(s) totaling \$160.00. However, the document has not been filed and is being retained in this office for the following:

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 912A00012651

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	Trial Assist, LLC		
	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC	.")	
co	f name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a coponsent of the managers or managing members adopting the alternate name. The alternate name must include "Limite ompany," "L.L.C," "LLC.")		
2.	State of Delaware 3. 45-5065500		
	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)		
4.	April 17, 2012 5. Perpetual		
	(Date of Organization) (Duration: Year limited liability company will consist or "perpetual")	ase 1	to
6.			<u></u>
	(See sections 608.501 & 608.502 F.S. to determine penalty liability)	S MAY	SECRE VISION
7.	1920 Northgate Blvd. STE A9		<u> </u>
	Sarasota, FL 34234	-0	CROSED CROSED
	(Street Address of Principal Office)	:2	STA CRA
8.	. If limited liability company is a manager-managed company, check here	5	LIONS LE
9.	. The name and usual business addresses of the managing members or managers are as follows:		
	Steven E. Paley, 1920 Northgate Blvd. STE A9, Sarasota, FL 34234		
	Michael J. Slomak, 23500 Mercantile RD. STE A, Beachwood, OH 44122		
			
the	0. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custo be jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign langual anslation of the certificate under eath of the translator must be submitted.)		
11	Nature of business or purposes to be conducted or promoted in Florida:		
	Litigation and Trial Support Services		·
	Jan July		
	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	ı a	
	document to the Department of State constitutes a third degree felony as provided for in s.817.155, l	².S.)	
	Steven E. Paley		

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.

Trial Assist, LLC	ompany is:	
If unavailable, the alternate to be used	in the state of Florida is:	
2. The name and the Florida street add	ress of the registered agent and office are:	
Steven E. Paley	(Nama)	
2631 Puritan Terra Florida Stree	(Name) ace at Address (P.O. Box NOT ACCEPTABLE)	
Sarasota	FL 34239 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 Filin

Filing Fee for Application

\$ 25.00

Designation of Registered Agent

\$ 30.00 \$ 5.00 Certified Copy (optional)
Certificate of Status (optional)

12 MAY 17 PH 2: 4



PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "TRIAL ASSIST 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 FOURTEENTH DAY OF MAY, A.D. 2012.

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

5141530 8300

120506679

AUTHENT CATION: 9569799

DATE: 05-14-12

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