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(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:	(Re	questor's Name)	
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D. BRUCE

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EXAMINER

FILED FILED FILED FILED 12 AUG - 2 AM IO: 12 SECRETARY OF STATE 2012 AUG - 2 PH 4: 36ALLAHASSEE, FLORID, SECRETARY BY STATE SECRETARY BY STATE CORPDIRECT AGENTS, INC. (formerly CCRS) 515 EAST PARK AVENUE TALLAHASSEE, FL 32301 222-1173

FILING COVER SHEET ACCT. #FCA-14

CONTACT: <u>RICKY SOTO</u>

DATE: <u>08/02/2012</u>

REF. #: 001495.170637

CORP. NAME: AFG PRO MANAGERS LLC

() ARTICLES OF INCORPORATION	() ARTICLES OF AMENDMENT	() ARTICLES OF DISSOLUTION
() ANNUAL REPORT	() TRADEMARK/SERVICE MARK	() FICTITIOUS NAME
(XX) FOREIGN QUALIFICATION	() LIMITED PARTNERSHIP	() LIMITED LIABILITY
() REINSTATEMENT	() MERGER	() WITHDRAWAL
() CERTIFICATE OF CANCELLATION	I	

() OTHER:

	m n n a				100390	
STATE	FEES	PREPAID	WITH	CHECK#	100710	FOR

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_ COST LIMIT: \$_____

\$ <u>155.00</u>

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PLEASE RETUR	N:	
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(XX) CERTIFIED COPY () CERTIFICATE OF GOOD STANDING () PLAIN STAMPED COPY

() CERTIFICATE OF STATUS

Examiner's Initials

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:

1. AFG Pro Managers LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")

2	Delaware	3.	13-4033264	
	(Jurisdiction under the law of which foreign limited liability company is organized)		(FEI number, if applicable)	
4	10/06/1998	5	Perpetual	
	(Date of Organization)	,	(Duration: Year limited liability company will cease to 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. 111 John Street, #700, New York, N.Y. 10038

(Street Addre	ss of Principal	Office)

BOG

- 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:

Lester Edelman, 111 John Street, #700, New York, N.Y. 10038

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida:

Management entity of purchasing group.

Management entity of purchasing group.
All
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.)
Lester Edelman, Authorized Representative

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:

AFG Pro Managers 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:

United Corporate Services, Inc.

(Name)

9200 South Dadeland Blvd., Suite 508

Florida Street Address (P.O. Box NOT ACCEPTABLE)

Miami, FL 33156 City/State/Zip

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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 are registered agent as provided for in Chapter 608, Florida Statutes.

(Signature)

Michael A. Barr, President & CEO

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



PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AFG PRO MANAGERS 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 SECOND DAY OF AUGUST, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AFG PRO MANAGERS LLC" WAS FORMED ON THE SIXTH DAY OF OCTOBER, A.D. 1998.

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



2952309 8300

120898447 You may verify this certificate online at corp.delaware.gov/authver.shtml

Jeffrey W. Bullock, Secretary of State AUTHENTY CATION: 9753209

DATE: 08-02-12