

M120000005139

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

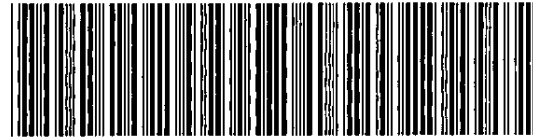
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SEP 17 2012

EXAMINER



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09/10/12--01001--010 **125.00

FR
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 SEP 10 PM 3:18

BARITZ & COLMAN LLP

Attorneys at Law

1075 Broken Sound Parkway, NW

Suite 102

Boca Raton, Florida 33487

561.864.5100

Facsimile: 561.864.5101

OFFICES IN FLORIDA & NEW YORK

September 4, 2012

VIA US Mail

Division of Corporations

Registration Section

P.O. Box 6327

Tallahassee, Florida 32314

RECEIVED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 SEP 10 PM 3:18

Re: Tristar Employee LLC-Filing Application by Foreign LLC for Authorization
to Transact Business in Florida.

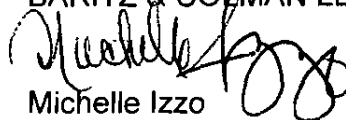
Greetings:

Enclosed please find our Application for Tristar Employee LLC, a
Delaware LLC to transact business in Florida. Also enclosed is a certificate of
existence from the State of Delaware dated August 27, 2012 and our check in
the amount of \$125.00 representing the filing fee

After filing please return a file stamped copy in the stamped self-
addressed envelope provided.

If you have any questions, please do not hesitate to call.

Very truly yours,
BARITZ & COLMAN LLP.



Michelle Izzo
Paralegal

enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Tristar Employee 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:

Michelle Izzo

Name of Person

Baritz & Colman LLP

Firm/Company

1075 Broken Sound Parkway NW Suite 102

Address

Boca Raton, Florida 33487

City/State and Zip Code

gwilliams@tristarmgt.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michelle Izzo

Name of Person

at (561)

864-5100

Area Code & Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

FILED
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
12 SEP 10 PM 3:18



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 7, 2012

MICHELLE IZZO
BARTIZ & COLMAN LLP
1075 BROKE SOUND PARKWAY NW SUITE 102
BOCA RATON, FL 33487

SUBJECT: TRISTAR EMPLOYEE LLC
Ref. Number: W12000046414

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 SEP 10 PM 3:18

We have received your document for TRISTAR EMPLOYEE LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

The name designated in your document is unavailable because it is the same as or not distinguishable from an existing entity. If the principals are the same in both entities, please send a letter or affidavit advising us of this association, along with your articles so that we may complete the filing process.

Please return 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.

Neysa Culligan
Regulatory Specialist II

Letter Number: 912A00022700

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

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

1. Tristar Employee 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

(Jurisdiction under the law of which foreign limited liability company is organized)

3. _____

(FEI number, if applicable)

4. 7/2/12

(Date of Organization)

5. perpetual

(Duration: Year limited liability company will 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. 751 Park of Commerce Drive Suite 128

Boca Raton, Fl 33487

(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:

Martin Pechter

751 Park of Commerce Drive Suite 128

Boca Raton, Fl 33487

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: Investment



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.)

Martin Pechter, Manager

Typed or printed name of signee

FILED
SECRETARY OF STATE
DIVISION OF CORPORATE REGISTRATION
SEP 10 10 31 PM '12

**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:

Tristar Employee 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:

Baritz & Colman LLP

(Name)

1075 Broken Sound Parkway NW Suite 102

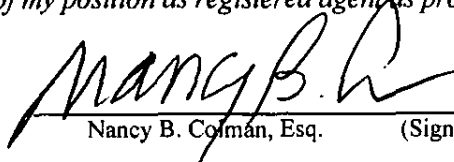
Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Boca Raton

FL 33487

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.



Nancy B. Colman, Esq.

(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 "TRISTAR EMPLOYEE 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-SEVENTH DAY OF AUGUST, A.D. 2012.

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



5178353 8300

120959017

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


Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 9806505

DATE: 08-27-12