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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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PECINETARY OF STATE
ALLARIASSEE FLORINA

K.SALY EXAMINER OCT 18 2012

COVER LETTER

TO:

TO:	Registration Section Division of Corporations	
SUBJE	ECT: BMTM Condo, LLC Name of Limited Liability Company	
	nclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Center, and check are submitted to register the above referenced foreign limited liability company to transact business	
Please	return all correspondence concerning this matter to the following:	
	Joshua A Gropp, Esq. Name of Person	
	Goede & Adamczyk, PLLC Firm/Company	
	8950 Fontana Del Sol Way, Suite 100 Address	
	Naples, FL 34109 City/State and Zip Code	
	Josh@FLcommunitylaw.com E-mail address: (to be used for future annual report notification)	
For furt	rther information concerning this matter, please call:	
	Joshua A. Gropp at (239) 331-5100 Name of Person 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	
	sed is a check for the following amount: \$\sigma \text{\$125.00 Filing Fee & Certificate of Status} \text{\$\sigma \text{\$155.00 Filing Fee & Certified Copy}} \text{\$\sigma \text{\$\sigma \text{\$160.00 Filing Fee, Certificate of Status}} \$\sigma \text{\$\sigma \tex	

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. BMTM Condo, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "L	LC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a consent of the managers or managing members adopting the alternate name. The alternate name must include "Lin Company," "L.L.C," "LLC.")	
2. Pennsylvania 3. (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)	
4. Spingle 25, 2012 (Date of Organization) 5. perpetual (Duration: Year limited liability company wiexist or "perpetual")	
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	12 0CT
7. 104 Franklin Circle, Indiana, Pennsylvania 15701	了 写 日
(Street Address of Principal Office) 3. If limited liability company is a manager-managed company, check here	120CT 17 PK III. ST
9. The name and usual business addresses of the managing members or managers are as follow Bradley J. Martineau - 104 Franklin Circle, Indiana, Pennsylvania 15701	'S:
Taya L. Matineau - 164 Franklis Circle, Indiano, Pennylu	1501
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having outhe jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign la ranslation of the certificate under oath of the translator must be submitted.)	stody of records in nguage, a
Nature of business or purposes to be conducted or promoted in Florida: any lawful purpose	
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 penalties of perjury that the facts stated herein are true. I am aware that any false information submitted document to the Department of State constitutes a third degree felony as provided for in s.817.155	l in a

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:					
вмтм с	Condo, LLC				
If unavail	able, the alternate to b	e used in the state of Florida is:			
2. The na	ame and the Florida st	eet address of the registered agent and office are:			
	Goede & Adar	czyk, PLLC			
		(Name)			
		Del Sol Way, Suite 100			
	Flor	da Street Address (P.O. Box NOT ACCEPTABLE)			
	Naples	FL 34109			
		City/State/Zip			
liability co agent and relating to	ompany at the place de agree to act in this cap the proper and compl	agent and to accept service of process for the above stated limited ignated in this certificate, I hereby accept the appointment as registered acity. I further agree to comply with the provisions of all statutes te performance of my duties, and I am familiar with and accept the stered agent as provided for in Chapter 608, Florida Statutes.			

Filing Fee for Application

Certified Copy (optional)

Designation of Registered Agent

Certificate of Status (optional)

\$ 100.00

\$ 25.00

\$ 30.00

\$ 5.00

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

OCTOBER 1, 2012

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

BMTM Condo, LLC

is duly organized as a Pennsylvania Limited Liability Company under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT, This Subsistence Certificate shall not imply that all fees, taxes, and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Secretary of the Commonwealth

Certification Number: 10595519-1

Verify this certificate online at http://www.corporations.state.pa.us/corp/soskb/verify.asp