# Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Foreign Limited Liability Company FIRST NATIONWIDE TITLE AGENCY LLC

Certificate of Status Certified Copy Page Count Estimated Charge

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#### COVER LETTER

	ation Section in of Corporations				
SUBJECT:	First Nationwide Title Agency LLC Name of Limited Liability Company				
The enclosed "A Existence, and o	application by Foreign Limited Liability Company for Authorization to Transact Ausiness in Florida," Certificate of the above referenced foreign limited liability company to transact business in Florida				
Please return all correspondence concerning this matter to the following:					
	Bernadette Cuevas Name of Person				
	First Nationwide Title Agency UC.				
	220 E. 42nd Street, Suite 3105				
New York, NY 10017  City/State and Zip Code					
	bcuevas & first nationwide title . com  E-mail address: (so be used for future annual report notification)				
For further infor	mation concerning this matter, please call:				
Be	rnadute avas ar 212, 4990100  Name of Person Area Code & Daytime Telephone Number				
Divisio Registr P.O. Bo Tallaha	NG ADDRESS: STREET ADDRESS:   Division of Corporations				
	check for the following amount:  Filing Fee & S160.00 Filing Fee, Certificate  Certificate of Status  Certified Copy				

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#### 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. First Nationwide Title Agency LLC.	
(Name of Foreign Limited Liability Company; must include "Linked 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. New York 3. 455292110	
(PEI number, if applicable) company is organized)	
4. 05/2012 5. Perpetual	
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	
6. NA	2 <u>113</u>
Comme strips extendeded determine out a server in additionally	
	- III
NW VINY P. J. NY 10017	1.1.
	λ Ή
9. The name and usual business addresses of the managing members or managers are as follows:	4
Steven M. Napolitano	
220 E. 42nd Street #3105, New York, NY 10017	
10 Attrohadis va prisini antificuta of suitana and a contract of the contract	
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	
ranslation of the certificate under onth of the translator must be submitted.)	
11. Nature of business or purposes to be conducted oppromoted in Florida: Title Agent	
Phil	
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	
penulties of perjury that the facts stated herein are true. I am aware that any false information submitted in	
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	

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### 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 Comp	eany is:	
First	Nationwide Ti-	He Ageney LLC	
If unavailab	le, the alternate to be used in the	1	
2. The name	and the Florida street address	of the registered agent and office are:	SECIE ALL AH
	C T Corporation System		32 , <b>—</b>
		(Namo)	25° 0 E
	1200 South Pine Island Road		F STA
	Florida Street Add	ress (P.O. Box <u>NOT</u> ACCEPTABLE)	57 RIDA
	Plantation	. FL 33324	
	· · · · · · · · · · · · · · · · · · ·	City/State/Zip	
liability comp agent and ag relating to th	pany at the place designated in the ree to act in this capacity. I further proper and complete performation as registered agent CT Corporation System By:	ture)	as registered tatutes cept the
	\$ 100.00 \$ 25.00	Filing Fee for Application	
	\$ 25,00	Designation of Registered Agent	

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

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## State of New York Department of State } ss:

I hereby certify, that FTRST NATIONWIDE TITLE AGENCY LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 05/10/2012, and that the Limited Liability Company is existing so far as shown by the records of the Department.



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Witness my hand and the official seal of the Department of State at the City of Albany, this 07th day of January two thousand and thirteen.

Daniel Shapiro Special Deputy Sec

Special Deputy Secretary of State

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