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(Requestor's Name)
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PICK-UP WAIT MAIL
· -
(Business Entity Name)
(business Entity Name)
(Document Number)
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FLORIDA DEPARTMENT OF STATE Division of Corporations

February 6, 2013

EKATERINA FOMINA 17000 NO5RTH BAY ROAD BLD J, 502 SUNNY ISLES, FL 33160

SUBJECT: CROWN FUNDING LLC Ref. Number: W13000007427

We have received your document for CROWN FUNDING LLC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The correct forms are enclosed.

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 245-6052.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 713A00002952

CR2E027 (9/10)

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Florida Grown Funding, 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:
Exaterina Fomina Name of Person
Crown Funding LAC Firm Company
17000 North Bay Road Bld 1, 502
Sunny 18 les, Fd 33160 City/State and Zip Code e-foming@yahao.com E-mail address (to be used for future annual report notification)
For further information concerning this matter, please call:
Ekaterina Fomina at 732 207-9940 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 Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: \$\square\$\pi\$\$ \$\square\$\$ \$\square\$\$ \$\square\$\$ \$\square\$\$ \$\square\$\$\$ \$\square\$\$\$ \$\square\$\$\$ \$\square\$\$\$ \$\square\$\$\$ \$\square\$\$\$\$ \$\square\$\$\$ \$\square\$\$\$\$ \$\square\$\$\$\$\$ \$\square\$\$\$\$\$ \$\square\$\$\$\$\$\$ \$\square\$\$\$\$\$\$\$\$ \$\square\$
Department had received 170.00 for incorrect filience

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. Crown Funding Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
FLURIDA CROWN FUNDING 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 NT 26-278 2074
2. Use (Jurisdiction under the law of which foreign limited liability company is organized) 3. 26-248844 (FEI number, if applicable)
4. 08/14/09 5. 00 Det per Limited liability company will cease to
4. Osto of Organization) 5. Osto Of Organization (Date of Organization) 6. Ouration: 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.
173 Livingston Ave, New Brunswick NJ 08901 (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:
Eraterino Fomino
17000 North bay Road Bld 1 502
17000 North bay Road Bld 1,502 Sunny Isles Fd 33160
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:
- Oquirige
Low
Signature of a member or an authorized epresentative 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.)
<u>Ekaletina Fomina</u>
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:
Grown Frending Limited Liability Compo
If unavailable, the alternate to be used in the state of Florida is:
Florida Crown, Lic
2. The name and the Florida street address of the registered agent and office are:
Exaterina Fomina
17000 North Bay Road Blot 1,502 Florida Street Address (R.G. Box NOT ACCEPTABLE)
Sunny Isles FL 0.33160 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 Filing Fee for Application

\$ 25.00 \$ 30.00

5.00

Designation of Registered Agent

Certificate of Status (optional)

Certified Copy (optional)

WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

We, the undersigned, do hereby certify that we are the Managers and/or Managing
Members of Crown Funding LLC Limited Linbility Company
(Nume of Limited Liability Company)
a limited liability company duly organized and existing under the laws of
New Jersey
(State or Chumiry of Organization)
Because the name of this foreign limited liability company does not satisfy the
requirements of the s. 608.406, F.S., the limited liability company hereby adopts the
following name to transact business in the state of Florida:
Florida Crown Funding LLC
(Name to be used by limited liability company in Florida. NOTE: Name most end with Limited Liability Company, L.L.C., or LLC.)
Date: 03/06/2013
Signature(s) of Manager(s) and/or Managing Member(s):
Soul/
<u> </u>

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

CROWN FUNDING LIMITED LIABILITY COMPANY

0400245338

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on August 14, 2008.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

Ekaterina Fomina 223 Route 18 South Suite 205 East Brunswick, NJ 08816

OF THE STATE OF TH

Certification# 127291138

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 31st day of January, 2013

Andrew P Sidamon-Eristoff
State Treasurer

Verify this certificate at https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp