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Certified Copies	_ Certificates	of Status
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RECEIVED 13 MAR 27 PH 2: 46

SECRETARY OF STATE TALLAHASSEE, FLORID

FILED

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#### **COVER LETTER**

TO:

Registration Section Division of Corporations

CHD IECT.

PlaceMakers, 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:

### Susan Henderson

Name of Person

PlaceMakers, LLC

Firm/Company

5136 Sevilla Ave., NW

Addres

Albuquerque, NM 87120

City/State and Zip Code

#### susan@placemakers.com

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

For further information concerning this matter, please call:

#### Susan Henderson

,,505 🕠

332956

SH

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

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

## 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. PlaceMakers, LLC  (Name of Foreign 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.")	_
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liab Company," "L.L.C," "LLC.")	
<sub>2.</sub> Wilmington, DE 3	
(Jurisdiction under the law of which foreign limited liability company is organized)  3. (FEI number, if applicable)	
4. March 19, 2003 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)	<b>7</b> 813
7. 5136 Sevilla Ave., NW	
Albuquerque, NM 87120	MAR 2
(Street Address of Principal Office)	_~ ;
8. If limited liability company is a manager-managed company, check here	골 (
	2 اخ
9. The name and usual business addresses of the managing members or managers are as follows:	ω
Susan Henderson, Director of Design	
5136 Sevilla Ave., NW	
Albuquerque, NM 87120	
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, translation of the certificate under eath of the translator must be submitted.)  11. Nature of business or purposes to be conducted or promoted in Florida:  Urban planning	
and community outreach consultation.	
Similar Simila	<b></b> •
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.)	
Susan Henderson	

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:  PlaceMakers, 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:	788 788
DeWayne Carver	語る。
(Name)	論。
322 Beard Street	F ST.
Florida Street Address (P.O. Box NOT ACCEPTABLE)	ATE ROP
Tallahassee <sub>FL</sub> 32303	<i>*</i>
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	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 "PLACEMAKERS, 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 TWENTIETH DAY OF MARCH, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PLACEMAKERS, LLC" WAS FORMED ON THE FOURTH DAY OF FEBRUARY, A.D. 2009.

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

4652544 8300

130338023
You may verify this certificate online at corp.delaware.gov/authver.shtml

AUTHENTY CATION: 0299448

DATE: 03-20-13