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CÒVER LETTER

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	ation Section n of Corporations				
SUBJECT:	PRIVACY REF	LLC			
		Name of Lim	nited Liability Company		
				insact Business in Florida," Certificate of company to transact business in Florida	
Please return all	correspondence co	oncerning this matter to the	following:		
		ROBERT	J. SIEGEL, MEMBER	R	
		Na	ame of Person		
		PRIVACY	REF LLC		
		Fi	rm/Company		
		123 N.	CONGRESS AVENUE,	#317	
			Address		
	BOYNTON BEACH, FL 33426				
		City/So	ate and Zip Code		
			egel@privacyref.o		
		E-mail address: (to be used	for future annual report noti	fication)	
For further infor	mation concerning	this matter, please call:			
ROBE	R J. SIEGE	L	at (_508)474	-5125	
-	Name o	of Person Are	a Code & Daytime Telephone	Number	
MAILING ADDRESS: Division of Corporations Registration Section		Divisio Registr	ET ADDRESS: n of Corporations ation Section		
	ox 6327 assee, FL 32314	2661 E	Building xecutive Center Circle assee, FL 32301		
	check for the fo 5,00 Filing Fee	ollowing amount: \$\square\$ \$\\$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 LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE S	
, PRIVACY REF LLC	STATE OF FLORIDA:
(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 consent of the managers or managing members adopting the alternate Company," "L.L.C," "LLC.")	
	45-5541406
2. (Jurisdiction under the law of which foreign limited liability company is organized) 3.	(FEI number, if applicable)
4. JUNE 21, 2012 5.	NONE
4. Other 21, 2012 (Date of Organization) 5.	(Duration: Year limited liability company will cease to exist or "perpetual")
6.	
6(Date first transacted business in Floric (See sections 608.501 & 608.502 F.S. to	da, if prior to registration.) o determine penalty liability)
7 123 N. CONGRESS AVENUE, #317	
,	
BOYNTON BEACH, FL 33426	Principal Office)
(Silver radioss of	
8. If limited liability company is a manager-managed co	ompany, check here
9. The name and usual business addresses of the manag	ging members or managers are as follows:
ROBERT J. SIEGEL, MANAGING MEMBER	
123 N. CONGRESS AVENUE, #317	
BOYNTON BEACH, FL 33426	
10. Attached is an original certificate of existence, no more than 90 dathe jurisdiction under the law of which it is organized. (A photocopy translation of the certificate under oath of the translator must be subm	
11. Nature of business or purposes to be conducted or p	promoted in Florida:
PRIVACY AND DATA SECURITY CONSULTAN	NT Simple Control of the Control of
RNS:	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Signature of a member of an auth	orized representative of a member.
(In accordance with section 608.408(3), F.S., the executi	ion of this document constitutes an affirmation under the I am aware that any false information submitted in a
	third degree felony as provided for in s.817.155, F.S.

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

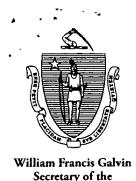
PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of	the Limited Liability Company is:				
PRIVACY REF LLC					
If unavailable, th	e alternate to be used in the state of Florida is:				
2. The name and	I the Florida street address of the registered agent and office are:				
	(Name)				
	123 N. CONGRESS AVENUE, #317				
•	Florida Street Address (P.O. Box NOT ACCEPTABLE)				
	BOYNTON BEACH FL 33426				
·	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.

RJ 5- (Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)



Commonwealth

The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02183

April 8, 2013

TO WHOM IT MAY CONCERN:

I hereby certify that a certificate of organization of a Limited Liability Company was filed in this office by

PRIVACY REF LLC

in accordance with the provisions of Massachusetts General Laws Chapter 156C on June 21, 2012.

I further certify that said Limited Liability Company has filed all annual reports due and paid all fees with respect to such reports; that said Limited Liability Company has not filed a certificate of cancellation or withdrawal; and that said Limited Liability Company is in good standing with this office.

I also certify that the names of all managers listed in the most recent filing are: NONE

I further certify, the names of all persons authorized to execute documents filed with this office and listed in the most recent filing are: **ROBERT J. SIEGEL**

The names of all persons authorized to act with respect to real property listed in the most recent filing are: **ROBERT J. SIEGEL**



In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth

Min Travin Galein