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Florida Department of State
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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : INCORP SERVICES INC
Account Number : I20120000007
Phone : (702) 866-2500
Fax Number : (702) 866-2689

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: Managedcompliance@incorp.com

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TALLAHASSEE, FLORIDA

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Foreign Limited Liability Company
Alexander & McCabe Financial LLC

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| Certificate of Status | 0 |
| Certified Copy | 1 |
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Alexander & McCabe Financial 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:

Amber Ragland
Name of Person

InCorp Services, Inc.
Firm/Company

2360 Corporate Circle - Suite 400
Address

Henderson, NV 89074-7722
City/State and Zip Code

managedcompliance@incorp.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Amber Ragland on behalf of Incorp Services, Inc. at (702) 866-2600
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

113000137037 3

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. Alexander & McCabe Financial 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 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. California (Jurisdiction under the law of which foreign limited liability company is organized) 3. N/A (FBI number, if applicable)

4. 12/31/2010 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")

6. Upon Registration (Date first transacted business in Florida, if prior to registration. (See sections 608.501 & 608.502 F.S. to determine penalty liability))

7. 180 Redwood St. #650 San Francisco, CA 94102 (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:

- Member Manager, Matthew Ostrander 180 Redwood St. #650, San Francisco, CA 94102
Member Manager, Alan Sagatelyan 180 Redwood St. #650, San Francisco, CA 94102
Member Manager, Michael Patricio 180 Redwood St. #650, San Francisco, CA 94102

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: Appraisal Management Company, Valuation Management Service

Handwritten signature of Michael Patricio

(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.)

Michael Patricio (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 Company is:

Alexander & McCabe Financial 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:

InCorp Services, Inc.
(Name)

17888 67th Court North
Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Loxahatchee FL 33470
City/State/Zip

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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.

 on behalf of InCorp Services, Inc.
(Signature)

- \$ 100.00 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 California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME: ALEXANDER & MCCABE FINANCIAL LLC

FILE NUMBER: 201101110013
FORMATION DATE: 12/31/2010
TYPE: DOMESTIC LIMITED LIABILITY COMPANY
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of June 13, 2013.

DEBRA BOWEN
Secretary of State

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