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COVER LETTER

TO:

Registration Section
Division of Corporations

RIECT: TEMPLE TERRACE, FL-PUBLIX, 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:

correspondence concerning this matter to the following:	
NORMAN B. KRONE, ESQ	TALL
Name of Person	SEP
THE KRONE LAW FIRM, LLC	ARY C
Firm/Company	— AH 8:
100 MAIN STREET SUITE 200	98 ORIEN
Address	
SAFETY HARBOR, FLORIDA 34695	

City/State and Zip Code

NBKRONE@KRONELAWFIRM.COM

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

For further information concerning this matter, please call:

NORMAN B. KRONE, ESQ. at (727) 216-6977

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. TEMPLE TERRACE, FL-PUBLIX, LLC (Name of Foreign Limited Liability Company; must inc.)	clude "Limited Liability Company," "L.L.C.," or "LLC.")	
	pose of transacting business in Florida and attach a copy of the writternate name. The alternate name must include "Limited Liability	ten
_{2.} DELAWARE	3.	
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)	
_{4.} 9-9-13	, PERPETUAL	
(Date of Organization)	5. PERPETUAL (Duration: Year limited liability company will cease to exist or "perpetual")	
6.		r s i
(Date first transacted business in F (See sections 608.501 & 608.502 F.	Florida, if prior to registration.) S. to determine penalty liability)	SEC
₇ 100 MAIN STREET, SUITE 206	SP AHA	RE 7
	0E & S	AR R
SAFETY HARBOR, FLORIDA 3469 (Street Address	es of Principal Office)	30
8. If limited liability company is a manager-managed		7 1 1
9. The name and usual business addresses of the ma	anaging members or managers are as follows:	
William E. Touloumis		
100 main Street, Suit	e 206	
Safety Harbor, FL	34695	
10. Attached is an original certificate of existence, no more than 9 the jurisdiction under the law of which it is organized. (A photograms translation of the certificate under oath of the translator must be se		ds ir
11. Nature of business or purposes to be conducted any LAWFUL PURPOSE	or promoted in Florida:	
7.111 2.111 0.11 0.92///	// /	
Signature of a member or an a	authorized representative of a member.	
(In accordance with section 608,408(3), F.S., the exe	ecution of this document constitutes an affirmation under the	
• • • •	true. I am aware that any false information submitted in a tes a third degree felony as provided for in s.817.155, F.S.)	
WILLIAM E. T		

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.

	of the Limited Liability Company is: E TERRACE, FL-PUBLIX, 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:	13 S
	NORMAN B. KRONE, ESQ.	CRET LAHZ SEP I
,	(Name)	ASSE
	100 MAIN STREET, SUITE 200	AH 8:
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	ORIO,
	SAFETY HARBOR, 51 34695	.

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.

City/State/Zip

(Oigitataic)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "TEMPLE TERRACE, FL-PUBLIX, 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 NINTH DAY OF SEPTEMBER, A.D. 2013.

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AUTHENT CATION: 0718369

DATE: 09-09-13

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