Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : VCORP SERVICES, LLC

Account Number : I20080000067

Phone

: (845)425-0077

Fax Number

: (845)818-3588

**Enter the email address for this business entity to be used for Enture annual report mailings. Enter only one email address please. Email Address: MCDRTSCOOME, COM

Foreign Limited Liability Company TPRE LLC

| Certificate of Status | 0 |
|-----------------------|----------|
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JAN 2 9 2014

1/04/0014

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A

| OREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: TPRE LLC |
|--|
| (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "I., L.C.," or "LLC.") |
| Fname unavailable, onter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited ability Company," "L.L.C." or "LLC.") |
| New Jersey 3. |
| (Jurisdiction under the law of which foreign limited liability (FEI number, il applicable) company is organized) |
| |
| (Dute first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty flability) |
| 10 Buttonwood Place |
| Upper Saddle River, New Jersey 07458 |
| (Street Address of Principal Office) |
| 10 Buttonwood Place |
| Upper Saddle River, New Jersey 07458 |
| (Mailing Address) |
| 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: |
| Iulia M. Prisco, 10 Buttonwood Place, Upper Saddle River, New Jersey 07458 Mem |
| Anatoly E. Tolpin, 5 Hamilton Drive South, North Caldwell, New Jersey 07006, Mcm |
| |
| Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official aving custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not eceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator just be submitted) |
| Julia Como |
| Signature of an authorized person a accordance with section 605 0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I |

Julia M. Prisco, Member

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

| TPRE L | of the Limited Liability Cou LC | mpany is: | |
|-----------------|--|--|-----|
| If unavailable, | , the alternate to be used in | the state of Florida is: | |
| 2. The name a | and the Florida street addre | ss of the registered agent and office are: | |
| | Julia M. Prisco | o | |
| | | (Name) | • . |
| | 420 64th Aver | nue, Unit 406E | |
| | Florida Street Address (P.O. Box NOT ACCEPTABLE) | | |
| | St. Pete Beach | EL 33706 | _ |
| | | 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 605. 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)

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

TPRE LLC

0600406955

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 January 21, 2014.

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:

Julia M Prisco 10 Buttonwood Place Upper Saddle River, NJ 07458

THE STATE OF THE S

Certification# 130920773

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seul at Trenton, this 24th day of January, 2014

Andrew P Sidamon-Eristoff
State Treasurer

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