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FEB 1 9 2014

T. BROWN

Feb 12, 2014

McGrady & Associates, LLC

PO Box 5089

Navarre, FL 32566

**Division of Corporation** 

**Registration Section** 

PO Box 6327

Tailahassee, FL 32314

Dear Sir:

Please find a cover letter and application for authorization for my limited liability company to transact business in Florida. Also, a "certificate of fact" from the state of Texas where my company was formed and registered is enclosed along with my check for \$160 to cover registration and appropriate document copies.

Thank you for your attention in this matter.

Very respectfully

Lloyd W. McGrady

**Managing Partner** 

#### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Mc Grady & Associates, 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:
Lloyd W. Mc Grady Name of Person
McGrady & Associates, LLC.
Po Box 5089  Address
NAVARRE FL 32566 City/State and Zip Code
Imagrady @ awardwinning proposals. com Email address: (b be used for future annual report notification)
For further information concerning this matter, please call:
Lloyd W. McGRady at (850) 684 - 3122  Name of Contact Person Area Code Daytime Telephone Number
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301
Enclosed is a check for the following amount:  \$\Boxed{1} \\$125.00 \text{ Filing Fee} \\ \$\Certificate \text{ Certificate of Status} \\ \$\Boxed{1} \\$155.00 \text{ Filing Fee & Certificate of Status} \\ \$\Boxed{1} \\$160.00 \text{ Filing Fee, Certificate of Status} \\ \$\Boxed{1} \\$160.00 \text{ Filing Fee, Certificate of Status} \\ \$\Boxed{1} \\$160.00 \text{ Filing Fee, Certificate of Status} \\ \$\Boxed{1} \\$160.00 \text{ Filing Fee, Certificate of Status} \\ \$\Boxed{1} \\$160.00 \text{ Filing Fee, Certificate of Status} \\ \$\Boxed{1} \\$160.00 \text{ Filing Fee, Certificate of Status} \\ \$\Boxed{1} \\$160.00 \text{ Filing Fee, Certificate of Status} \\ \$\Boxed{1} \\$160.00 \text{ Filing Fee, Certificate of Status} \\ \$\Boxed{1} \\$160.00 \text{ Filing Fee, Certificate of Status} \\ \$\Boxed{1} \\$160.00 \text{ Filing Fee, Certificate of Status} \\ \$\Boxed{1} \\$160.00 \text{ Filing Fee, Certificate of Status} \\ \$\Boxed{1} \\$160.00 \text{ Filing Fee, Certificate of Status} \\ \$\Boxed{1} \\$160.00 \text{ Filing Fee, Certificate of Status} \\ \$\Boxed{1} \\$160.00 \text{ Filing Fee, Certificate of Status} \\ \$\Boxed{1} \\$160.00 \text{ Filing Fee, Certificate of Status} \\ \$\Boxed{1} \\$160.00 \text{ Filing Fee, Certificate of Status} \\ \$\Boxed{1} \\$160.00 \text{ Filing Fee, Certificate of Status} \\ \$\Boxed{1} \\$160.00 \text{ Filing Fee, Certificate of Status} \\ \$\Boxed{1} \\$160.00 \text{ Filing Fee, Certificate of Status} \\ \$\Boxed{1} \\$160.00 \text{ Filing Fee, Certificate of Status} \\ \$\Boxed{1} \

## 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 FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. MeGra	dy & Associates	, LLC			
(Name of For	eign Ulmited Liability Company; must inch	ade "Limited Li	ability Company," "L.L.C	.," or "LLC.")	
	alternate name adopted for the purpose of the	ransacting busin	ess in Florida. The alterna	te name must include "Limi	ited
Liability Company," "L.L.C	·	:	12C- 2112-	.1.21	
2. HARUS (Jurisdiction under the la	w of which foreign-limited liability	3	(FEI number, if ap	plicable)	
company is organized)					
4	(Date first transacted business in	Florida, if prior	to registration.)		
_	(See sections 605,0904 & 605,0905	eet	ine penalty flability)	70 ±	
5			21		77
	Navarre (Street Address	FL	32566	HIV. B	
			<i>:</i>	SE B	ill
6	PO B			70 70	O
	Navarr	e th	<u>:: 32566</u>	95 -	
	(Mani	ng Address)		A	
7. The name, title of	r capacity and address of the pers		• •	manage is/are:	
	Lloyd W				
	Managina 7129 F	a Par	rther		
	7129 F	Leef	ST		
	Navarr	e, F	L 32566		
-	ginal certificate of existence, no i	nore than 90	days old, duly autl		cial
	cords in the jurisdiction under the tificate is in a foreign language, a				lator
must be submitted)	interior is in a foreign ranguage, t	·	,		
	Real	Stone of	The same		
	Signature of a	n authorized	person	<del></del>	
	5.0203, F.S., the execution of this document con ation submitted in a document to the Departmen	stitutes an affirma	tion under the penalties of pe		n are true. I
	Lloud	w).	McGrad	LÍ	
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## 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.

1. The name of the Limited Liability Company is:
McGrady & Associates, 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:
Lloyd W. McGrady
7129 Reef ST  Florida Street Address (P.O. Box NOT ACCEPTABLE)
Navarre FL 32566
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)

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



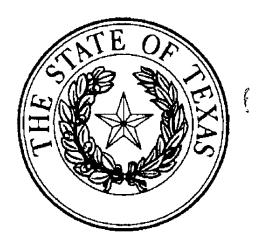
### Office of the Secretary of State

#### **Certificate of Fact**

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for McGrady & Associates, LLC (file number 801495712), a Domestic Limited Liability Company (LLC), was filed in this office on October 18, 2011.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on February 10, 2014.



NANDITA BERRY

Nandita Berry Secretary of State

Come visit us on the internet at http://www.sos.state.tx.us/

Fax: (512) 463-5709 TID: 10264 Dial: 7-1-1 for Relay Services Document: 528659680003