02/27/2014 12:33 Division of Corporations Florida Department of State Division of Corporations	
Electronic Filing Cover Sheet	
Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.	
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To: Division of Corporations Fax Number : (850)617-6383 Division of Corporations	
From: Account Name : C T CORPORATION SYSTEM Account Number : PCACOOOCOC23 Phone : (850) 222-1092 Fax Number : (850) 878-5368 PLEASE GIVE ORIGINAL SUBMISSION DATE AB FILE DATE DATE AB FILE DATE DATE AB FILE DATE	
**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**	
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#### COVER LETTER

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TO: Registration Section Division of Corporations

# SUBJECT, Pace Americas, LLC

Name of Limited Liability Company

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The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Cortificate of Existence, and check are submitted to register the above reforenced foreign limited liability company to transact business in Florida.

Please return all correspondence concorning this matter to the following:

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Sean McGhie
Name of Person
Pace Americas, LLC
Firm/Company
3701 FAU Blvd., Suite 200
Address
Boca Raton, FL 33431
City/State and Zip Coda
darla.skolnick@pace.com
B-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Darla Skolnick561995-6016
Name of Contact Person Area Codo Daytime Telephone Number
MAILING ADDRESS: STREET ADDRESS:   Division of Corporations Division of Corporations   Registration Section Registration Section   P.O. Box 6327 Clifton Building
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount:
☐ \$125.00 Filing Pee

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DATE AS FILE DATE

February 26, 2014

FLORIDA DEPARTMENT OF STATE **Division of Corporations** 

SUBJECT: PACE AMERICAS, LLC REF: W14000012520

We have received your document for PACE AMERICAS, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan Regulatory Specialist II

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FAX Aud. #: H14000046515 Letter Number: 014A00004270

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PLENCE GIVE ORIGINAL SUBMISSION DATE AS FILE DATE

P.O BOX 6327 - Tallahassee, Florida 32314

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#### 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	Pace A	mericas,	LLC	• • • • •	 •••

(Name of Poreign 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. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC,")

2			
יז	Jurisdiction under the law of which foreign limited liability company is organized)	(PEI number, If applicable)	****
4.	12/31/2013		
	(Date first transacted busines (Sea sections 605.0904 & 603.09	s in Florida, if prior to registration.) 905, P.S. to determine penalty liability)	1.1.1
5.	3701 FAU Blvd., Suite 200		771 6
5,	Rece Deter El 22424		5

- · · ·

Boca Raton, FL 33431

6. same

(Mailing Address)

(Street Address of Principal Office)

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Timothy O'Loughlin, 3701 FAU Blvd., Suite 200, Boca Raton, FL 33431 - AMBE
Juan Valdivieso, 3701 FAU Blvd., Suite 200, Boca Raton, FL 33431 - AMBR
Sean, McGhie, 3701 FAU Blvd., Sulte 200, Boca Raton, FL 33431 - MGR

8. 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)

Signature of an authorized person

(In accordance with section 605,0203, F.S., the execution of this document constitutes on affirmation under the penaltics 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 as third degree felony in provided for in 3.817,155, P.S.)

## Sean McGhie

Typed or printed name of signee

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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:

# Pace Americas, 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:

NRAI Service	s, inc.			FEB 2
	(Name)		SSE	25
1200 South P	ine Island Roa	ad	r"q Fo	AF
Florida Street	Address (P.O. Box NOT ACC	Ceptabls)	ORIUA	
Plantation	33324			·· u

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.

Withele Michele Holden, Assistant Secretary

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- \$ 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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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO BEREBY CERTIFY "PACE AMERICAS, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND RAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FIFTH DAY OF FEBRUARY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PACE AMERICAS, LLC" WAS FORMED ON THE SIXTH DAY OF APRIL, A.D. 2006.

AND I DO HEREBY FORTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

AND I DO BEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

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AUTHENTSCATION: 1159560

DATE: 02-25-14 H140000465153