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B. BOSTICK

APR - 3 2014

EXAMINER



MARK S. LEVINE

Certified Circuit Civil Mediator Mark@levinestiverslaw.com

H.B. STIVERS

Certified Circuit Civil Mediator HB@levinestiverslaw.com

RONALD G. STOWERS

Ron@levinestiverslaw.com

GERALD A. LEWIS

of Counsel

Certified Circuit Civil Mediator

DONN A. CLENDENON (1935-2005)

March 28, 2014

Registration Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

Re:

Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida

Aces Title Agency

Dear Sir or Madam:

Enclosed for filing please find the original of the Application By Foreign Limited Liability Company for Authorization to Transact Business in Florida for the above referenced company. I have enclosed our check payable to the Florida Department of State in the amount of \$125.00 to cover the filing fees.

Please return all correspondence concerning this matter to the undersigned.

Sincerely

H.B. Stivers

### 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. ACES Title Agency, LLC					
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.,"	or "LLC.")	<del></del>			
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate Liability Company," "L.L.C," or "LLC.")	name must include	e "Limited			
Delaware 3, 46-4751641					
(Jurisdiction under the law of which foreign limited liability (FEI number, if appli company is organized)	cable)	<del></del>			
4. (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)					
<sub>5.</sub> 2151 East Commercial Blvd, Suite 203					
Fort Lauderdale, FL 33308		•			
(Street Address of Principal Office)					
6. 1188 Centre Street		•••			
Newton, MA 02459	,				
(Mailing Address)					
` '					
7. The name, title or capacity and address of the person(s) who has/have authority to n	nanage is/are:	<del>n</del>			
7. The name, title or capacity and address of the person(s) who has/have authority to n Konstantinos Ligris, MGR	nanage is/are:	m m m			
	nanage is/are:	27 75 86			
Konstantinos Ligris, MGR	nanage is/are:				
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Konstantinos Ligris, MGR  188 Centre Street Newton, MA 02459	ticated by the	ot			
188 Centre Street  Newton, MA 02459  (617) 274-1500  8. Attached is an original certificate of existence, no more than 90 days old, duly authen having custody of records in the jurisdiction under the law of which it is organized. (A pacceptable. If the certificate is in a foreign language, a translation of the certificate under	ticated by the	ot			
188 Centre Street  Newton, MA 02459  (617)-274-1500  8. Attached is an original certificate of existence, no more than 90 days old, duly authen having custody of records in the jurisdiction under the law of which it is organized. (A pacceptable. If the certificate is in a foreign language, a translation of the certificate under must be submitted)  Signature of an authorized person  In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury	aticated by the photocopy is represented to the transfer of th	ranslator			
188 Centre Street  Newton, MA 02459  (617) 274-1500  8. Attached is an original certificate of existence, no more than 90 days old, duly authen having custody of records in the jurisdiction under the law of which it is organized. (A pacceptable. If the certificate is in a foreign language, a translation of the certificate under must be submitted)	aticated by the photocopy is represented to the transfer of th	ranslator			

### 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.

ACES Title		_ • •			
		n the state of Florida is:	·····		
2. The name and the	Florida street addr	ress of the registered agent and office	are:		
Le	vine & Stiv	ers LLC	<del>1</del>	781	
		(Name)	,	, ,	4.2
24	5 E. Virgini	a Street		:	
	Florida Stree	t Address (P.O. Box NOT ACCEPTABLE)		· U	
Tall	ahassee	<sub>FL</sub> 32301	 	ان. (۲) ليد ا	
		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)

## Delaware

PAGE 1

#### The First State

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

DELAWARE, DO HEREBY CERTIFY "ACES TITLE AGENCY 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 TWENTY-FOURTH DAY OF MARCH, A.D. 2014.

5280617 8300

140368381

AUTHENTY CATION: 1233204

DATE: 03-24-14

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



March 28, 2014

H.B. STIVERS 245 E. VIRGINIA STREET TALLAHASSEE, FL 32301

SUBJECT: ACES TITLE AGENCY, LLC

Ref. Number: W14000019882

We have received your document for ACES TITLE AGENCY, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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.

Barbara Bostick Regulatory Specialist II

Letter Number: 114A00006707