

APR. 18. 2014

DIVISION OF CORPORATIONS

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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Foreign Limited Liability Company
Don Mott Associates, L.L.C.

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EXAMINER

APR. 18. 2014 3:43PM

NO. 5733 P. 3



390 NORTH ORANGE AVENUE
SUITE 1400
ORLANDO, FLORIDA 32801
PO BOX 4961 (32802-4961)
TELEPHONE 407.539.4200
FACSIMILE 407.424.5577
www.broadandcassel.com

April 18, 2014

Office of the Secretary of State
State of Florida – Filing Section

Re: Don Mott Associates, Inc.
Our File No. 02141.1388
Document Number 213164

Dear Sir or Madam:

The undersigned, as the President of Don Mott Associates, Inc., a Florida corporation, hereby authorizes the use of the name "Don Mott Associates" by Don Mott Associates, L.L.C., a Delaware limited liability company, to transact business in Florida. Any potential name conflicts are hereby waived.

If you have any questions, please let me know. Thank you for your assistance.

Very truly yours,



Michael J. Sciarrino

2014 APR 18 A 3:28
FILED

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

*IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A
FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. Don Mott Associates, L.L.C.

(Name of Foreign 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. Delaware

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 46-5378195

(FBI number, if applicable)

4. _____

(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 700 West Morse Boulevard, Suite 220

Winter Park, Florida 32789

(Street Address of Principal Office)

6. 700 West Morse Boulevard, Suite 220

Winter Park, Florida 32789

(Mailing Address)

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

Michael J. Sciarrino, Manager

700 West Morse Boulevard, Suite 220

Winter Park, Florida 32789

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 an affirmation under the penalties 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 a third degree felony as provided for in s.817.135, F.S.)

Peter A. Schoemann

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.

1. The name of the Limited Liability Company is:

Don Mott Associates, L.L.C.

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:

B&C Corporate Services of Central Florida, Inc.

(Name)

390 North Orange Avenue, Suite 1400

Florida Street Address (P.O. Box NOT ACCEPTABLE)

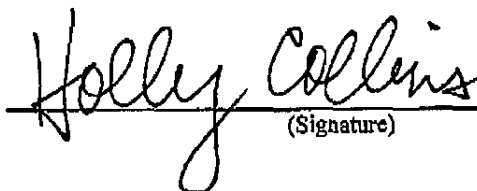
Orlando

32801

FL

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)

2014 APR 18 A 0:20

FILED

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DON MOTT ASSOCIATES, L.L.C." 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 FOURTH DAY OF APRIL, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DON MOTT ASSOCIATES, L.L.C." WAS FORMED ON THE THIRD DAY OF APRIL, A.D. 2014.


2014 APR 18 A 9:28



5510344 9300

140430923

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


Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 1268270

DATE: 04-04-14



April 18, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

BROAD AND CASSEL

SUBJECT: DON MOTT ASSOCIATES, L.L.C.
REF: W14000024617

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable because it is the same as or not distinguishable from an existing entity. If the principals are the same in both entities, please send a letter or affidavit advising us of this association, along with your articles so that we may complete the filing process.

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.

Karen A Saly
Regulatory Specialist II

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Letter Number: 414A00008325

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TALLAHASSEE, FLORIDA

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