# M1400003410

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
W14-38124				

Office Use Only



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MAY 21 2014 J. BRUCE

#### FLORIDA DEPARTMENT OF STATE Division of Corporations.

May 13, 2014

ROBERT J. LOBOSCO 999 WALT WHITMAN ROAD, SUITE 201 MELVILLE, NY 11747

SUBJECT: FREEDOM LAND TITLE AGENGY LIMITED LIABILITY COMPANY

Ref. Number: W14000030124

We have received your document for FREEDOM LAND TITLE AGENGY LIMITED LIABILITY COMPANY and your check(s) totaling \$160.00. 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.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Deborah Bruce Regulatory Specialist II

Letter Number: 514A00010193

### **COVER LETTER**

TO: Registration Division of C					
Freed	lom Land Title Agend	cy Limited Liability Company			
SUBJECT:	Name o	of Limited Liability Company			
The enclosed "Applica Existence, and check a	ation by Foreign Limited Liabili are submitted to register the abo	ity Company for Authorization to Transact Business in Florida," C ve referenced foreign limited liability company to transact busine	Certificate of ss in Florida.		
Please return all corres	spondence concerning this matte	er to the following:			
Ro	bert J. Loboso	CO			
Name of Person					
Freedom Land Title Agency Limited Liability Company					
Firm/Company					
999 Walt Whitman Road - Suite 201					
<u></u>		Address			
Me	elville, NY 117	47			
City/State and Zip Code					
pb	ortone@freedo				
	•	to be used for future annual report notification)	2014		
For further informatio	on concerning this matter, please	e call:	3		
Peg B	Bortone	at 631 423-1300 数量	MAY 20		
	Name of Contact Person	Area Code Daytime Telephone Number	2 0		
MAILING A Division of C Registration P.O. Box 632 Tallahassee,	Corporations Section 27	STREET ADDRESS:  Division of Corporations  Registration Section  Clifton Building  2661 Executive Center Circle  Tallahassee, FL 32301	1:26		
Enclosed is a chec ☐ \$125.00 F	ck for the following amoun Filing Fee S130.00 Filing Certificate of S	Fee & \$\square\$ \$\frac{1}{2}\$\$ \$155.00 Filing Fee & \$\frac{1}{2}\$\$\$ \$160.00 Filing Fee, Cer			

# 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. Freedom Land Title Agency Limited Liabili (Name of Foreign Limited Liability Company; must include	ity Company	C	_
(Name of Foreign Limited Liability Company; must include	e "Limited Liability Company, L.L.C., or LL		_
(If name unavailable, enter alternate name adopted for the purpose of tran Liability Company," "L.L.C," or "LLC.")	nsacting business in Florida. The alternate name r	nust include "Lin	nited
2. New Jersey 3.	27-3366472		_
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)		
4 <i>N/A</i>	!		_
(Date first transacted business in Fl (See sections 605.0904 & 605.0905, F	S.S. to determine penalty liability)		
5		والمراجعة المراجعة ال	<del>-</del>
318-L Jefferson Street, Newark, N			
(Street Address o	f Principal Office)	数 数 数	genane genane
6		20 P	_
999 Walt Whitman Road, Suite 20	O1, Melville, NY 11/4/ (Address)		- (7)
7. The name, title or capacity and address of the perso		26 26	
$\Lambda = \Lambda V_{\star} \rho W_{\star}$	ggg Walt W Lit from R	ge is/arc.	
Raymond J. Suris - PRINCIPALITY	Milwiles My	11 +47	- 
Helen Manfre - PRINCIPA 2" DELLA	999 Walt Whitmankd.	Melvill	eNY - 1174
Robert J. LoBosco - PRINCIPADIO	999 Walt Whitman Rd.	Helville	14,
8. Attached is an original certificate of existence, no mo			11747
having custody of records in the jurisdiction under the	law of which it is organized. (A phot	ocopy is not	
acceptable. If the certificate is in a foreign language, a t must be submitted)	translation of the certificate under oa	th of the tran	slator
Simulation	/		
Signature of an (In accordance with section 605.0203, F.S., the execution of this document constitution and aware that any false information submitted in a document to the Department of the D			
Robert LoBosco			

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:

## Freedom Land Title Agency Limited Liability Company

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:

InCorp Services, Inc.

(Name)

17888 67th Court North

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

Loxahatchee

33470

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

#### FREEDOM LAND TITLE AGENCY LIMITED LIABILITY COMPANY

0400555948

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 March 8, 2013.

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:

Raymond J. Suris 318-L Jefferson Street Newark, NJ 07105

THE STATE OF THE S

Certification# 132292038

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my fofficial Seal at Trenton, this 20th day of May, 2014

& h. ~

Andrew P Sidamon-Eristoff
State Treasurer

Verify this certificate at https://www1.state.nj.us/TYTR\_StandingCert/JSP/Verify\_Cert.jsp