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PICK-UP	☐ WAIT	MAIL		
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Certified Copies	Certificate	s of Status		
Special Instructions to Fili	ng Officer:			

Office Use Only



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TALLARIA SCORE ORIGINAL



### Phillips, Cantor, Shalek, Rubin & Pfister, P.A.

#### ATTORNEYS AT LAW

June 19, 2014

### Via FedEx

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

Re: Application by Foreign Limited Liability Company X-Cogitate, LLC

#### Dear Sir/Madam:

Enclosed please find the following:

- 1. Original executed Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida.
- 2. Original Certificate of Good Standing and Legal Existence issued by the Delaware Secretary of State on June 19, 2014.
- 3. Check made payable to the Florida Department of State in the amount of \$125.00 to cover the filing fee and designation of registered agent.

Please file the attached Application immediately. If there are any delays in processing the Application, please contact the undersigned immediately.

Very truly yours,

Jeffrey J. Wolfe

### COVER LETTER

TO: **Registration Section** 

**Division of Corporations** 

X-Cogitate, 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:

correspondence concerning and matter to the following.					
Marci A. Rubin					
Name of Person					
Phillips, Cantor, Shalek, Rubin & Pfister, P.A.					
Firm/Company					
4000 Hollywood Blvd., Suite 500-N					
Address					
Hollywood, Florida 33021					
City/State and Zip Code					
mrubin@phillipslawyers.com					
E-mail address: (to be used for future annual report notification)					
mation concerning this matter, please call:					

For further infor

Marci A. Rubin

Name of Contact Person

Daytime Telephone Number

**MAILING ADDRESS:** 

**Division of Corporations** Registration Section P.O. Box 6327 Tallahassee, FL 32314

**STREET ADDRESS:** 

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

Enclosed is a check for the following amount:

■ \$125.00 Filing Fee

□ \$130.00 Filing Fee & Certificate of Status

□ \$155.00 Filing Fee & Certified Copy

□ \$160.00 Filing Fee, Certificate of Status & Certified Copy

## 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. X-Cogitate, LLC  (Name of Foreign Limited Liability Company; 1)	must include "Limite	ed Liability Company "" L.C."	or "LLC")		
(value of Foreign Blanted Elability Company, )	mast morace Think	a maoning company, missen,	(A BBC.)		
(If name unavailable, enter alternate name adopted for the pur Liability Company," "L.L.C," or "LLC.")	rpose of transacting	business in Florida. The alternate	name must in	clude "L	imited
<sub>2.</sub> Delaware	3				
(Jurisdiction under the law of which foreign limited liabilit company is organized)	ty	(FEI number, if appl	icable)		
4. N/A					
(Date first transacted by (See sections 605.0904 &	usiness in Florida, if 605.0905, F.S. to de	prior to registration.) termine penalty liability)			
5. 3430 NE 6th Terrace				<del>.</del>	
Pompano Beach, Florida 33					
	et Address of Princip	al Office)			
<sub>6.</sub> 3430 NE 6th Terrace			<del></del>		
Pompano Beach, Florida 33	8064				
	(Mailing Address	5)	z		_
7. The name, title or capacity and address of	the person(s) w	ho has/have authority to r	nanage is/	′are:_	
Walt Gazdayka, Managing Me	ember			<u></u>	3 %
3430 NE 6th Terrace	_			96	of man
Pompano Beach, Florida 3306	64			70 32	Trans.
8. Attached is an original certificate of existen having custody of records in the jurisdiction unacceptable. If the certificate is in a foreign language must be submitted)	nder the law of	which it is organized. (A	photocopy	y is no	t

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 817-155, F.S.)

## Marci A. Rubin, Authorized Representative

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 X-Cogita	of the Limited Liability Co	ompany is:			
If unavailable,	the alternate to be used in	n the state of Florida is:			
2. The name a	and the Florida street addr	ress of the registered agent and office are:			_
	Marci A. Rubi	in			
		(Name)	_		
	4000 Hollywo	ood Blvd., Suite 500-N			
	Florida Stree	t Address (P.O. Box NOT ACCEPTABLE)	— ## Es		
	Hollywood	<sub>FL</sub> 33021	And the second s	96 阳矿 5	1
		City/State/Zip	_ ;:: <sub>.,</sub>	E	,
			,	دت	T Hight
liability comparegistered ages	any at the place designated nt and agree to act in this ng to the proper and compl igations of my position as i	and to accept service of process for the above in this certificate, I hereby accept the appoint capacity. I further agree to comply with the plete performance of my duties, and I am family registered agent as provided for in Chapter 6	ntment d provisio liar with	as ons of and	

\$ 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 "X-COGITATE, 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 NINETEENTH DAY OF JUNE, A.D. 2014.

14 JUN 26 FIT 3: 87
TALLAHOSSEE TOORIS

5554421 8300

140854388

AUTHENTY CATION: 1467154

DATE: 06-19-14

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