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AUG 28 2014

# THE LAW OFFICES OF LISA P. WILDSTEIN, LLC

233 S. 6TH ST. TOWER TWO #706 PHILADELPHIA, PENNSYLVANIA 19106  
TEL (215) 880-8358 FAX (561) 469-8948

Lisa P. Wildstein  
[lwildstein@me.com](mailto:lwildstein@me.com)  
New Jersey  
District of Columbia  
Pennsylvania

August 06, 2014

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

**Re: The Law Offices of Lisa P. Wildstein, LLC**

To Whom It May Concern:

I would like to register my foreign limited liability company, The Law Offices of Lisa P. Wildstein, LLC, to transact business in Florida.

Enclosed please find:

- An original Certificate of Existence *(the state of NJ only issues computer generated)*
- A fully executed Cover Letter, Application by Foreign Limited Liability Company and Certificate of Designation
- Check in the amount of \$160.00 made payable to Florida Department of State

Of course, should you have any questions or comments, please do not hesitate to contact me.

As always, I thank you for your kind courtesies.

Sincerely yours,

  
Lisa P. Wildstein

LPW/ew

Enclosures



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 5, 2014

LISA WILDSTEIN  
8641 WELLINGTON VIEW DR  
WEST PALM BEACH, FL 33411

SUBJECT: THE LAW OFFICES OF LISA P. WILDSTEIN, LLC  
Ref. Number: W14000047739

We have received your document for THE LAW OFFICES OF LISA P. WILDSTEIN, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity must be identical throughout the document.

Please return the corrected original and one copy of 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.

Justin M Shivers  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 414A00016717

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: THE LAW OFFICES OF LISA P WILDSTEIN LIMITED LIABILITY COMPANY**  
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:

**LISA PAM WILDSTEIN, ESQUIRE**

Name of Person

**THE LAW OFFICES OF LISA P WILDSTEIN LIMITED LIABILITY COMPANY Y**

Firm/Company

**8641 WELLINGTON VIEW DRIVE**

Address

**WEST PALM BEACH, FLORIDA 33411**

City/State and Zip Code

**lwildstein@me.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**LISA PAM WILDSTEIN**

**215**

**880-8358**

Name of Contact Person

at ( )

Area Code

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  
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:*

**THE LAW OFFICES OF LISA P WILDSTEIN LIMITED LIABILITY COMPANY**

1. \_\_\_\_\_  
(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.")

**NEW JERSEY**

**Federal ID# 27-2227303**

2. \_\_\_\_\_ 3. \_\_\_\_\_  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

n/a

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

**8641 Wellington View Drive, West Palm Beach, Florida 33411**

5. \_\_\_\_\_  
(Street Address of Principal Office)

**8641 Wellington View Drive, West Palm Beach, Florida 33411**

6. \_\_\_\_\_  
(Mailing Address)

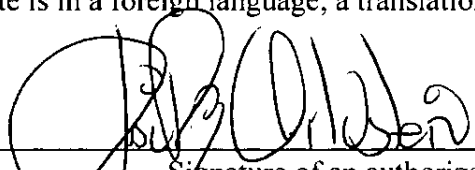
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7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

**Lisa Pam Wildstein, Esquire-owner**

**8641 Wellington View Drive, West Palm Beach, Florida 33411**

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.817.155, F.S.)

**Lisa Pam Wildstein**

\_\_\_\_\_  
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:  
**THE LAW OFFICES OF LISA P WILDSTEIN 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:

**Lisa Pam Wildstein**

(Name)

**8641 Wellington View Drive**

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

**West Palm Beach**

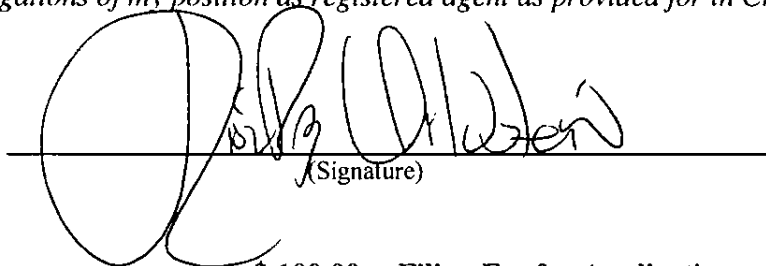
**33411**

**FL**

City/State/Zip

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TALLAHASSEE, FLORIDA

*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**

**THE LAW OFFICES OF LISA P WILDSTEIN LIMITED LIABILITY COMPANY**

0400340002

*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 30, 2010.*

*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:*

*Lisa Pam Wildstein  
Paintworks Corporate Center  
7 Foster Ave., Suite 201  
Gibbsboro, NJ 08026*

*I further certify that as of the date of this certificate, the following amendments and changes are on file in this office:*

*Change Of Registered Office*

*03/18/2014*



Certification# 133077092

Verify this certificate at  
[https://www1.state.nj.us/TYTR\\_StandingCert/JSP/Verify\\_Cert.jsp](https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp)

*IN TESTIMONY WHEREOF, I have  
hereunto set my hand and affixed my  
Official Seal at Trenton, this  
1st day of August, 2014*

A handwritten signature in black ink, appearing to read "Andrew P. Sidamon-Eristoff".

*Andrew P Sidamon-Eristoff  
State Treasurer*