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PICK-UP	☐ WAIT	MAIL	
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ON SERVICE COMPANY.				
ACCOUNT NO. : 12000000195				
REFERENCE : 371941 4307171				
AUTHORIZATION : Lines Blen				
COST LIMIT : 75 130.00				
ORDER DATE: November 10, 2014				
ORDER TIME : 3:28 PM				
ORDER NO. : 371941-005				
CUSTOMER NO: 4307171				
***				
FOREIGN FILINGS				
NAME: SANTA BARBARA ARMS MANAGER LLC				
XXXX QUALIFICATION (TYPE: <u>LL</u> )				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING				
CONTACT PERSON: Courtney Williams EXT# 62935				

EXAMINER:

#### **COVER LETTER**

TO:	Registration Section
	Division of Corporations

### Santa Barbara Arms Manager LLC

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:

David Buckley, Esq.		
Name of Person		
Rogin Nassau LLC		
Finn/Company		
185 Asylum Street, 22nd Floor		
Address		
Hartford, CT 06103		
City/State and Zip Code		
dbuckley@roginlaw.com		
E-mail address: (to be used for future annual report notification)		

For further information concerning this matter, please call:

David Buckley Name of Contact Person

**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 & □ \$155.00 Filing Fee & ■ \$160.00 Filing Fee, Certificate Certificate of Status Certified Copy of Status & Certified Copy



## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION 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 Santa Barbara Arms Manager LLC
(Name of Foreign Limited Liability Company; most include "Limited Liability Company," "LL, C," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of nansacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "L.L.C.")
2 Delaware (hirisdiction under the law of which foreign limited liability) 3. 47–2283329 (FE) number, if applicable)
(FE) number, if applicable)  (Company is organized)
4
(Date first transacted business in Florida, if provide registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5 20 Avon Meadow Lane, Suite 120 Clo Hagan Skowl
Avon, Connecticut 06001
(Street Address of Principal Office)
6. 20 Avon Meadow Lane, Suite 120
Avon, Connecticut 06001
(Mailing Address)
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
Hagan Brown, Manager
20 Avon Meadow Lane, Suite 120
Avon, Connecticut 06001
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)
Signamic of an authorized person
(in accordance with section 605,0203, I'S., the execution of this document constitutes an afformation under the penalties of periory that the facts stated berein are true named that any false information submitted in a document to the Department of State constitutes a third degree fellowy as provided for in a \$17.155, F.S.)
Hagan Brown, Manager

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:

Santa Barba	ara Arms Manager LLC		
If unavailat	ole, the alternate to be used in the	state of Florida is:	
2. The nan	ne and the Florida street address o	of the registered agent and office are:	
	Corporation Service Company		
		(Name)	
	1201 Hays Street		
	Florida Street Add	ress (P.O. Box NOT ACCEPTABLE)	
	Tallahassee	32301 FL	
		City/State/Zip	
liability con registered a statutes rela accept the o	npany at the place designated in the gent and agree to act in this capac ating to the proper and complete p	o accept service of process for the above stated limited his certificate, I hereby accept the appointment as city. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and tered agent as provided for in Chapter 605, Florida	
Statutes.	Corporation Service Company	Courtney Williams	
	By:	Asst. Vice President	
	(\$ignat	rure)	
	\$ 100.00 \$ 25.00	Filing Fee for Application Designation of Registered Agent	

\$ 30.00 Certified Copy (optional)

Certificate of Status (optional)

\$ 5.00

# Delaware

PAGE 1

#### The First State

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

DELAWARE, DO HEREBY CERTIFY "SANTA BARBARA ARMS MANAGER 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 TENTH DAY OF NOVEMBER, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SANTA BARBARA ARMS MANAGER LLC" WAS FORMED ON THE SEVENTH DAY OF NOVEMBER,

A.D. 2014.

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

5635525 8300

141390804

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

AUTHENT CATION: 1850697

DATE: 11-10-14