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SECRETARY OF STATE
LORIDA

K. SALY EXAMINER DEC 15 2014

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT: Hooves 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:
Richard F. Pappalardo
Name of Person
Piedmont Management Corp.
· Firm/Company
P.O. Box 219
Address
Upperville, VA 20185
City/State and Zip Code
rfp@newstead.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Richard F. Pappalardo at 540 592-3636
Name of Contact Person 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: \$\Bigsup \frac{1}{2}\$125.00 Filing Fee

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 Hooves LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LJ.C.") (If name unavailable, enter olternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") 2. Commonwealth of Virginia company is organized) 01/01/2015 (Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 33525 Newstead Lane Upperville, VA 20184 (Street Address of Principal Office) 6. P. O. Box 219 Upperville, VA 20185 (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Richard F. Pappalardo, VP-Finance, Piedmont Mgmt Corp., Manager of Classic LLC, Managing Member of Hooves LLC 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 om owere that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in a \$17.155, F.S.)

Richard F. Pappalardo

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.

 The name of the Limited Liability Company 	Ì.	The name	of the	Limited	Liability	/ Compan	y is:
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2. The name and the Florida street address of the registered agent and office are:

Steve Deutsch, C/O Frank, Weinberg & Black, P.L.

(Name)

1875 North West Corporate Blvd., Suite 100

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

Boca Raton

33431

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)

Commonboealth of Hirginia



State Corporation Commission

CERTIFICATE OF FACT

I Certify the Following from the Records of the Commission:

That HOOVES LLC is duly organized as a limited liability company under the law of the Commonwealth of Virginia;

That the date of its organization is March 15, 2010; and

That the limited liability company is in existence in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.

JAVIS SION COLUMNS SION 1903

Signed and Sealed at Richmond on this Date: November 25, 2014

Joel H. Peck, Clerk of the Commission

CISECOM

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