Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H150000089373)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BUSINESS FILINGS

Account Number : 105256001620 Phone : (608)827-5300

Fax Number : (608)827-5501

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:				

### Foreign Limited Liability Company ACCESS ELECTRONICS LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

HelpJAH 13 2015 J. BRUCE

# 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 LIMITED LIMITED TO REGISTER A FOREIGN LIMITED LIMITED TO REGISTER A FOREIGN.

1. Access Electronics LLC
(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 and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC,"
New Jersey 20-4795611
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4 Upon Filing
(Date first transacred business in Florida, if prior to registration.) (See sections 605,0964 & 605,0905, F.S. to determine penalty liability)
5 3625 Woodlake Dr., Bonita Springs, Florida 34134
<del></del>
(Street Address of Principal Office)
6. PO Box 2246, Bonita Springs, FL 34133
(Mailing Address)
7. The name, title or capacity and address of the person(s) who has have authority to manage with Member: Audrey E. Ferraro, 3625 Woodlake Dr., Bonita Springs. Florida 34134
Member: Kevin C. Fertaro. 3625 Woodlake Dr., Bonita Springs. Florida 34134
8. Anached is an original configure of existence, no more than 90 days old duly authenticated by the official having custody of records in the jurisdiction tanker 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 tanker coth of the translate, must be submitted.)  Signature of an jourthorized 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 between are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree fellony as provided for in s.817.155. F.S.)  Audrey E. Ferraro  Typed or printed name of signee

Fax audut # 415000089373

## 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.

	nies LLC		
If unavailable	e, the alternate to be used in	the state of Florida is:	
<del></del>			
2. The name	and the Florida street addre	ess of the registered agent and office are	
	Kevin C. Ferraro		5.5.5.5.5.5.5.5.5.5.5.5.5.5.5.5.5.5.5.
		(Name)	표현 <b>2</b> *
	3625 Woodlake Dr.	(Name)	SSA T
		(Name) Address (P.O. Box NOT ACCEPTABLE)	ARY OF
			ARY C

Having been named as registered agent and to accept service of process for the above stated limited liability company at the piace 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.

Kevin C. Ferraro

(pransume)

S 100.00 Filing Fee for Application
S 25.00 Designation of Registered Agent
S 30.00 Certified Copy (optional)
S 5.00 Certificate of Status (optional)

608 827 5501

P.002/004

### 608 827 5501 600 STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

#### ACCESS ELECTRONICS LLC

0600267567

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 April 21, 2006.

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:

Kevin Ferraro C/O Access Electronics Llc 353 Sweetmans Lane Peerineville, NJ 08535

THE STATE OF THE S

Certification# 134817611

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 12th day of January, 2015

Andrew P Sidamon-Eristoff
State Treasurer

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