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SECRETARY OF STATE

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Finzer & Perfetti, 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:

riease return an correspondence concerning into matter to the following:
Nicholas Finzer
Name of Person
Finzer · Perletti LCC
Firm/Company
3824 50th Ave S
Address
St. Petersburg, FL 33711
City/State and Zip Code
nick@finzerperfetti.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Nick Finzer 727 692-4135
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

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\$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. Finzer & Perfetti, LLC	
(Name of Foreign Limited Liability Company; must in	clude "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of Liability Company," "L.L.C," or "LLC.")	f transacting business in Florida. The alternate name must include "Limited
2. Delaware	₃ 47-1884167
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4.	
(Date first transacted business (See sections 605.0904 & 605.090	in Florida, if prior to registration.) 05, F.S. to determine penalty liability)
5. 970 Lake Carillon Drive, Suite	e 300
St. Petersburg, FL 33716	
(Street Addre	ess of Principal Office)
_{6.} 970 Lake Carillon Drive, Suite	300
St. Petersburg, FL 33716	
, ,	iling Address)
7. The name, title or capacity and address of the pe	erson(s) who has/have authority to manage is/are:
Nicholas Finzer, Manager	
970 Lake Carillon Drive, Suite	300
St. Petersburg, FL 33716	S J
8. Attached is an original certificate of existence, no having custody of records in the jurisdiction under the acceptable. If the certificate is in a foreign language, must be submitted) Signature of Cin accordance with section 605.0203, F.S., the execution of this document contains the section of this document contains a section of this document contains a section of the section of this document contains a section of this document contains a section of the section of this document contains a section of the section of this document contains a section of the section of	o more than 90 days old, duly authenticated by the official he law of which it is organized. (A photocopy is not a translation of the certificate under oath of the translator of the authorized person onstitutes an affirmation under the penalties of perjury that the facts stated herein are trent of State constitutes a third degree felony as provided for in s.817.155, F.S.)
Nicholas Finzer	

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.

AGENT IN TH	E STATE OF FLORIDA.				
1. The name of the Limited Liability Company is: Finzer & Perfetti, LLC					
If unavailable,	the alternate to be used in the state of Florida is:				
2. The name ar	nd the Florida street address of the registered agent and office are:				
	Joseph Ciarciaglino				
	(Name)				
	2111 Dr. Martin Luther King Jr. St. N				
	Florida Street Address (P.O. Box NOT ACCEPTABLE)				
	Saint Petersburg FL 33704 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. \$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent					

Certified Copy (optional)

Certificate of Status (optional)

\$ 30.00

5.00

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "FINZER & PERFETTI 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 EIGHTH DAY OF OCTOBER, A.D. 2014.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FINZER & PERFETTI LLC" WAS FORMED ON THE SECOND DAY OF SEPTEMBER, A.D. 2014.

15 JAN -2 AM ID: 29
SECRETARY OF STATE
TALL AHASSEE FLOORS

5595686 8300

141269254

AUTHENTICATION: 1762725

DATE: 10-08-14

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