1/1500000303/

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	//State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bus	siness Entity Nar	me)
(Doc	cument Number))
Certified Copies	. Certificates	s of Status
Special Instructions to F	Filing Officer:	
		Ì

Office Use Only



500271668395

2015 APR 22 AM 10: 16

SKINDERS OF SOURCE AND MORSELLE

RECEIVED

15 APR 22 AH II: II

K.SALY EXAMINER APR 23 2015 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 598751 4307171

AUTHORIZATION : CAPELLO COLOR

COST LIMIT : \$ 160.00

ORDER DATE: April 22, 2015

ORDER TIME : 8:49 AM

ORDER NO. : 598751-010

CUSTOMER NO: 4307171

FOREIGN FILINGS

NAME: 4312 SEAGRAPE MANAGER LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

___ PLAIN STAMPED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Lydia Cohen -- EXT# 62974

EXAMINER:

COVER LETTER

TO: Registration Section **Division of Corporations** 4312 Seagrape Manager 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: David Buckley, Esq. Name of Person Rogin Nassau LLC 185 Asylum Street, 22nd Floor 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: STREET ADDRESS: Division of Corporations Division of Corporations Registration Section Registration Section P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301 Enclosed is a check for the following amount: □ \$155.00 Filing Fee & ☐ \$125.00 Filing Fee □ \$130.00 Filing Fee & ■ \$160.00 Filing Fee, Certificate Certificate of Status of Status & Certified Copy 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 4312 Seagrape Manager LLC	
(Name of Foreign Limited Liability Company; must include "Lim	ited Liability Company," "LL.C.," or "LLC.")
If name unavailable, enter alternate name adopted for the purpose of transacting	g business in Florida. The alternate name must include "Limited
Liability Company," "L.L.C," or "LLC,")	
	+7-3784552
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
(Date first transacted business in Florida, (See sections 605,0904 & 605,0905, F.S. to o	if prior to registration.) determine penalty liability)
c/o Hagan Brown	3
5 COUNTAGE DIOWIN	
20 Avon Meadow Lane, Suite 120, Av	von, Connecticut 06001
(Street Address of Princ	ipal Office)
20 Avon Meadow Lane, Suite 120 🧪	
Avon, Connecticut 06001	
(Mailing Addre	
(Haming Audio	
7. The name, title or capacity and address of the person(s) v	who has/have authority to manage is/are:
Hagan Brown, Manager	
20 Avon Meadow Lane, Suite 120	
Avon, Connecticut 06001	
Avoir, Corinecticur 0000,1	
B. Attached is an original certificate of existence, no more th	on 00 days and dayly mathematicated handle a Cont.
aving custody of records in the jurisdiction under the law of	
ecceptable. If the certificate is in a foreign language, a transla	
must be submitted)	
Signature of an autho	prized person
in accordance with section 605.0203, F.S., the execution of this document constitutes at a maximum awar that any filse information submitted in a document to the Department of State constitution.	affirmation under the penalties of perjury that the facts stated herein are to
	solutions a time suggest today as proteined for in s.o.17,130, 1.3.)
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.

 The name of the Limited Liability Company i 	Company is	лавину Сотраг	lL	Limite	ine	01	name	i ne	1.
---	------------	---------------	----	--------	-----	----	------	------	----

4312 Seagrape Manager LLC

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:

Corporation Service Company

(Name

1201 Hays Street

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

Tallahassee

__ 32301

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

Stephanie Milnes Asst. Vice President

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "4312 SEAGRAPE 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 TWENTY-SECOND DAY OF APRIL, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "4312 SEAGRAPE MANAGER LLC" WAS FORMED ON THE THIRTEENTH DAY OF APRIL, A.D. 2015.

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

5727539 8300

150546122

Jeffrey W Bullock. Secretary of State

AUTHENTY CATION: 2311490

DATE: 04-22-15

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