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To:

Division of Corporations Fax Number : (850)617-6381

From:

Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023 Phone : (850)205-8842 Fax Number : (850)878-5368

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Email Address:

Foreign Limited Liability Company

## PCM Development, LLC

Certificate of Status	0
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	ntion Section n of Corporatio	ns			
	M Development				
50B/201.			Limited Liability C	ompany	
					ansact Business in Florida," Cortifi y company to transact business in i
Picase return all	correspondence	concerning this matter to the	: following:		
	Christopher J.	Leff, Esq.			
		ر ر	lame of Person		
	Paul Frank + C	Callins P.C.			
			irm/Company		
	P.O. Box 1307				
		<u>.                                    </u>	Address		
	Burlington, VI	05402-1307			
	<del></del>	City/	State and Zip Code		
	jpdavis@peakcn	n.com			
		E-mail address: (to be use	d for future annual	report no	lification)
For further infor	mation concernin	g this matter, please call:			
Christo	pher J. Leff		802 at (	658-23	11
<del></del>	Name	of Contact Person	Area Code	Døj	rtime Telephone Number
Division Registra P.O. Bo	NG ADDRESS: n of Corporation atton Section bx 6327 ssee, FL 32314			Division Registrat Clifton E 2661 Exe	<b>CADDRESS:</b> of Corporations ion Section suilding secutive Center Circle see, FL 32301
Enclosed is a che	ck for the follow	ing amount: □ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	g Foe &	\$160.00 Filing Fee, Certificat of Status & Certified Copy

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 805/002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO RECISTER A FOREICN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

PCM Development, LLC

.....

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, cater alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") Delaware

	1 TO-270/230
(Jurisdiction under the law of which foreign limited liability	2
	(FEI number, if applicable)
company is organized)	

(Dato first transacted business in Floride, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
(Sen sections 605 0004 & 605 0005 7 8 to determine metably lightlight
(See accious bosydor at bosydory, r.s. to determine pendity monity)

5. 676 Metcalf Drive

Williston, VT 05495

_		(Street Address of Principal Office)				
6. <u></u>	ame as street address.	•			2015	
_		(Maillag Address)			JUN 2	
7, N	lame and <u>street addres</u>	s of Florida registered agent: (P.O. Box NOT accepta	bic)		23	
	Name:	CT Corporation System			AH	Ö
	Office Address:	1200 South Pine Island Road			ထု	
		Plantation	, Florida	₽r	59	

\_\_\_\_\_, Florida \_\_\_\_\_\_ (Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I bereby accept the oppointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duttes, and I am familiar with and accept the obligations of my position as registered agent.

- Oracle		Vice President
70	(Registered agent's signature)	

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Jeny Davis, Sole Member, 676 Metcalf Drive, Williston, VT 05495

(Ċity)

9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)



(In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penaltics of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Jerry Davis

Typed or printed name of signee

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6/23/2015 10:34:46 AM From: To: 8506176381( 4/4 )

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Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PCM DEVELOPMENT, 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 NINETEENTH DAY OF JUNE, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN FAID TO DATE.

5339588 8300

150948356 You may verify this certificate online at corp.dolaware.gov/auther.shtml

W. Bulleck, Secretary of State AUTHENTICATION: 2484447

DATE: 06-19-15