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PLEASE FILE FIRST.

DO NOT SEPARATE.

THANKS!

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 704213

AUTHORIZATION :

COST LIMIT :

ORDER DATE : July 10, 2015

ORDER TIME : 10:11 AM

ORDER NO. : 704213-035

CUSTOMER NO: 7230352

#### FOREIGN FILINGS

NAME: PROQUEST ASSOCIATES L.L.C.

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_ CERTIFIED COPY XX PLAIN STAMPED COPY \_\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER:

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

	ATES, L.L.C.			•
(Name of Fore	eign Limited Liability Company; must in	nclude "Limited Liab	oility Company,""L.L.C.,"	or "LLC.")
name unavailable, enter al	lternate name adopted for the purpose of	f transacting business	s in Florida. The alternate n	ame must include "Limited
DELAWARE	of BEC. (	3 04-34281	85	
Jurisdiction under the law company is organized)	of which foreign limited liability	3	(FEI number, if applicab	le)
	(Date first transacted business	in Florida, if prior to	registration )	
2430 VANDERBILT I	(See sections 605.0904 & 605.090 BEACH ROAD, #108-190	05, F.S. to determine	penalty liability)	
NAPLES, FL 31409				_
<u> </u>	(Street Address of Prin	icipal Office)		<del></del>
PO Box 406				
Buckingham, PA	18912 (Mailing Add	iress)		<del></del>
Name and street addres	ss of Florida registered agent: (P.O.	Box NOT accepta	ible)	
Name:	Corporation Service Company	······································		
Office Address:	1201 Hays Street			
	Tallahassee		, Florida 32301	<u></u>
gistered agent's accept	(City)		(Zip code)	
s application, I hereby ( In the provisions of all s	gistered agent and to accept service accept the appointment as registere statutes relative to the proper and cition as registered agent,  Corporation Service Company  By:	ed agent and agree complete performan	to act in this capacity. nce of my duties, and I d COU	I further agree to comply
	(Registered	d agent's signature)	71001	The incident
			ty to manage is/are:	
•	icity and address of the person(s) wh			- F C. <b>- 1</b> ・ 9
•	acity and address of the person(s) whaging Member, PO Box 406, Buckin		<del></del>	7: 52 

Typed or printed name of signee

PASQUALE DEANGELIS

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

## Delaware

PAGE 1

### The First State

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

DELAWARE, DO HEREBY CERTIFY "PROQUEST ASSOCIATES, L.L.C." 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-EIGHTH DAY OF JULY, A.D.

2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PROQUEST ASSOCIATES, L.L.C." WAS FORMED ON THE SIXTEENTH DAY OF JUNE, A.D. 1998.

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

15 JUL 29 AM 7: 52
SECRETARY OF STATE
TALLAHASSEE FIORING

2887091 8300

151103569

AUTHENTY CATION: 2596359

DATE: 07-28-15

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