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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

FILED

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FLORIDA DEPARTMENT OF STATE Division of Corporations

October 2, 2015

JOSHUA GOLD 20 CABOT BLVD, STE 300 MANSFIELD, MA 02048

SUBJECT: THE LEGAL DEPARTMENT PLLC, LLC

Ref. Number: W15000060273

SECRETARY OF STATE TALL AHASSEE, FLORE

We have received your document for THE LEGAL DEPARTMENT PLEGAL DEP

You failed to make the correction(s) requested in our previous letter.

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 915A00020892



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 14, 2015

JOSHUA GOLD 20 CABOT BLVD, STE 300 MANSFIELD, MA 02048

SUBJECT: THE LEGAL DEPARTMENT PLLC, LLC

Ref. Number: W15000060273

We have received your document for THE LEGAL DEPARTMENT PLLC, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations LtdU and "Co.", also are no longer acceptable.

The document number of the name conflict is P01000091786.

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 115A00019318

_ www.sunbiz.org

COVER LETTER

	ation Section 1 of Corporation	ns					
SUBJECT: Th	e Legal Depa	rtment PLLC, LLC					
			Limited Liability (Company			
		reign Limited Liability Com ed to register the above refer					
Please return all o	correspondence (concerning this matter to the	following:				
	Joshua Gold						
		N	lame of Person				
	The Legal D	و epartment PLLC	د				
		F	irm/Company				
	20 Cabot Bo	ulevard, Suite 300	17-14-7-14-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1			2015	
			Address		!	S OCT	П
	Mansfield, N	NA 02048				SS ~ ~	
		City/S	State and Zip Code				T
i	ia@thelegald	epartment.biz				ST 2:	U
3		E-mail address: (to be use g this matter, please call:	d for future annual	report no	tification)	39 RIDA	
ror tarater mions	nation concernin	g tills matter, please call.					
Joshu	a Gold		at (_ 786	_) <u>368 40</u>			
	Name o	of Contact Person	Area Code	Day	ytime Telephone Nu	ımber	
	NG ADDRESS:				Γ ADDRESS:		
	Division of Corporations Registration Section Division of Corporations Registration Section						
Registra P.O. Bo				Clifton B			
	ssee, FL 32314			2661 Exe	ecutive Center Circl see, FL 32301	e	
Enclosed is a che	ck for the follow	ing amount:					
□ \$125.	.00 Filing Fee	☑ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filir Certified Copy	ng Fee &	☐ \$160.00 Filing of Status & Certi	•	te

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 COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. The Legal Departm	eign Limited Liability Company: must include "Limi	ted Liability Company," "L.L.C.," o	or "LLC.")	
LEGAL	DEPARTHENT (FLORIDA).	LIC		
(If name unavailable, enter a Liability Company," "L.L.C.	Itemate name adopted for the purpose of transacting	business in Florida. The alternate na	ame must include	"Limited
2 Massachusetts	3. 47-43	A32A1		
(Jurisdiction under the law	of which foreign limited liability	(FEI number, it applicable	le)	
company is organized)				
4. N/A	(Date first transacted business in Florida, if (See sections 605.0904 & 605.0905, F.S. to de	prior to registration.)		
	(See sections 605.0904 & 605.0905, F.S. to de	etermine penalty liability)		
5				
20 Cabot Boulevai	rd, Suite 300, Mansfield MA 02048			
	(Street Address of Principal Office))=	_	
6				
20 Cabot Bouleva	rd, Suite 300, Mansfield MA 02048		2015 SEC	
	(Mailing Address)		AH GI	-11
7. Name and street addres	ss of Florida registered agent: (P.O. Box NOT	acceptable)	SE 2	
Name:	Joshua Gold		EE O	
	7750 Noremac Avenue	······································		O
Office Address:			2: 3°	
	Miami Beach (City)	. Florida 33141	- BE 39	
Registered agent's accep	· • • • •	(Zip code)	-	
	gistered agent and to accept service of process			
	tion, I hereby accept the appointment as regist ons of all statutes relative to the <u>pr</u> oper and col			
accept the obligations of i	my position of registered gent		•	
PRINCIPAL	had that Told			
11/100-1-	(Registered agent's sign	nature)		
8. The name, tincor capa	acity and address of the person(s) who has/have	authority to manage is/are:		
Joshua Gold,∜7750 N	oremac Ave, Miami Beach FL 33141			
Sylvain Rouleau, 20 (Cabot Boulevard, Suite 300, Mansfield	MA 02048	~ _	
A	MANAGING DIRECTOR			
	THE DIESCOL			
	of existence, no more than 90 days old, duly aut			
jurisdiction under the law o of the translator must be su	of which it is organized. (If the certificate is in a	foreign language, a translation of	of the certificate	under oath
	11 Het 411			
	Signature of an authorized	person		
This document is executed	in accordance with section 605.0203 (1) (b), Flo	•	ny false informat	tion
submitted in a document to	the Department of State constitutes a third degr	ee felony as provided for in s.81	7.155, F.S.	
	Joshua Gold			

Typed or printed name of signee



The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02133

August 31, 2015

TO WHOM IT MAY CONCERN:

I hereby certify that a certificate of organization of a Limited Liability Company was filed in this office by

THE LEGAL DEPARTMENT, PLLC 🔃

in accordance with the provisions of Massachusetts General Laws Chapter 156C on July 8, 2015.

I further certify that said Limited Liability Company has filed all annual reports due and paid all fees with respect to such reports; that said Limited Liability Company has not filed a certificate of cancellation or withdrawal; and that said Limited Liability Company is in good standing with this office.

I also certify that the names of all managers listed in the most recent filing are: **JOSHUA** M. GOLD, ESQ.

I further certify, the names of all persons authorized to execute documents filed with this office and listed in the most recent filing are: **JOSHUA M. GOLD, ESQ.**

The names of all persons authorized to act with respect to real property listed in the most recent filing are: **JOSHUA M. GOLD, ESQ.**



In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth

William Travin Galein

Processed By:TAA