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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 19, 2016

CORPORATION SERVICE COMPANY - COURTNEY

SUBJECT: LANDMARK PARTNERS, LLC - FLORIDA

Ref. Number: 500286017195

RESUBMIT
Please give original
submission date as file date.

We have received your document for LANDMARK PARTNERS, LLC - FLORIDA and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The alternate name that you have chosen is not available. Please select a new name.

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.

Shelia H Young Regulatory Specialist II

Letter Number: 716A00020011

16 SEP 20 PH 2:

www.sunbiz.org

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE: 293914 AUTHORIZATION COST LIMIT : ORDER DATE: September 16, 2016 ORDER TIME : 11:22 AM ORDER NO. : 293914-010 CUSTOMER NO: 4308494 FOREIGN FILINGS NAME: LANDMARK PARTNERS, LLC XXXX QUALIFICATION (TYPE: LL) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY PLAIN STAMPED COPY XX_____ CERTIFICATE OF GOOD STANDING

EXAMINER:

CONTACT PERSON: Courtney Williams EXT# 62935

COVER LETTER

TO:	Registration Division of		15								
SUBJE		ırk Partners,	LLC - Florida				•				
	Name of Limited Liability Company										
							ansact Business in Florida," Certificate company to transact business in Fl				
Please r	eturn all corre	spondence o	concerning this mutter to the	follo	wing:						
	Lin	ida Rubes, P	aralegal								
Name of Person											
Reid and Riege, P.C.											
	Firm/Company										
One Financial Plaza, 21st Floor											
	Address										
Hartford, CT 06103							16 SEP 16 AM				
City/State and Zip Code									동군		
Sara.Lashetski@LandmarkPartners.com) 			
E-mail address: (to be used for future annual report notification)									710		
For furth	ner informatio	n concerning	g this matter, please call;					8: 47	FLOSIE		
	Linda Rubes	.		at (860 (240-11	171	-1	<u> </u>		
		Name o	f Contact Person		Area Code	Day	ytime Telephone Number				
	MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301										
Enclosed	d is a check fo □ \$125.00 F		ing amount: S130.00 Filing Fee & Certificate of Status		\$155.00 Filir rtified Copy	ig Fce &	☐ \$160.00 Filing Fcc, 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:

Landmark Partners, LL			
•	ign Limited Liability Company; must melu	de "Limited Liability Company," "L.L.C.,	or "LLC.")
Landmark Partners, LLC			
(If name unavailable, enter all Liability Company," "L.L.C,"	ternate name adopted for the purpose of tra ' or "LLC.")	nsacting business in Florida. The alternate	name must include "Limited
2. Delaware	3.		
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applica	blc)
4 March 1, 2014			
	(Date first transacted business in F (See sections 605.0904 & 605.0905,	lorida, if prior to registration.)	_
5. 10 Mill Pond Lane	(330 233,0,0,0 302,0,0 1 2 305,0,0,0 2)	(a, a 20,000,,,,,, politica)	
	·		
Simsbury, CT 06070	(Street Address of Principal	al Office)	
5 10 Mill Pond Lane	forest vamess of trineib	in Office)	ain No
U			16 SEP 1
Simsbury, CT 06070	(Mailing Address	A	16 SEP
	, J	•	-
7. Name and street addres	s of Florida registered agent: (P.O. Bo	x NOT acceptable)	6
Name:	Corporation Service Company	kadaa oraan oo	A
Office Address:	1201 Hays Street		ö
	Tallahassee	, Florida 32301	.
	(City)	(Zip code)	
designated in this applicate to complywith the provision accept the obligations of a	gistered agent and to accept service of tion, I hereby accept the appointment of ons of all statutes relative to the proper my position as registered agent. Corporation Service Com (Registered ag	as registered agent and agree to act in r and complete performance of my du	this capacity. I further agree
8. The name, title or caps	city and address of the person(s) who h	nas/have authority to manage is/are:	
Tina E. St. Pierre, Vice Pr	• ,,		
10 Mill Pond Lane			
Simsbury, CT 06070			
9. Attached is a certificate jurisdiction under the law of the translator must be su	of existence, no more than 90 days old of which it is organized. (If the certification in the certification is seen to be a second of the certification in the certification in accordance with section 605.0203 (1)	ate is in a forcign language, a translation ERS, LLC LLC ce President	on of the certificate under oath
	the Department of State constitutes a t		
	Tina E. St. Pierre Typed or printed		
	i ypcu of brinted	Hallic of Signed	

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "LANDMARK PARTNERS, 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 SIXTEENTH DAY OF SEPTEMBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LANDMARK

PARTNERS, LLC" WAS FORMED ON THE TWENTY-SIXTH DAY OF OCTOBER, A.D.

2010.

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

SELVE TARY OF STATE



4889697 8300

Authentication: 203006205

Date: 09-16-16

SR# 20165816590

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