

M18000000108

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

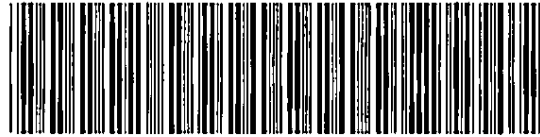
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

No
FO3-628
Consent letter
attached up

Office Use Only



000307060060

for LLC
M18-108

RECEIVED
FEB 29 2018
AM 8:35
FEB 29 2018
AM 8:35

2017 DEC 29 12:20:03

N. CAUSSEAU

JAN - 5 2018

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 986807 4803819

AUTHORIZATION :

COST LIMIT : \$160.00

ORDER DATE : December 29, 2017

ORDER TIME : 11:49 AM

ORDER NO. : 986807-005

CUSTOMER NO: 4803819

FOREIGN FILINGS

NAME: LEXINGTON MANAGEMENT GROUP,
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: Roxanne Turner -- EXT# 62969

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LEXINGTON MANAGEMENT GROUP, 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:

Michelle E. Vanderwall CPA, CGMA

Name of Person

CDL Family Office Services

Firm/Company

505 S. Flagler Drive, Suite 900

Address

West Palm Beach, FL 33401

City/State and Zip Code

mvanderwall@cdlcpa.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michelle E. Vanderwall CPA, CGMA

561
at ()

832.9292

Name of Contact Person

Area Code

Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☒ \$160.00 Filing Fee, Certificate
of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 29, 2017

CORPORATION SERVICE COMPANY
WALK-IN
PICK-UP
TALLAHASSEE, FL

SUBJECT: LEXINGTON MANAGEMENT GROUP, LLC
Ref. Number: W17000102485

We have received your document for LEXINGTON MANAGEMENT GROUP, LLC. However, the document has not been filed and is being returned for the following:

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 "Ltd." and "Co.," also are no longer acceptable.

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.

Nanette Causseaux
Regulatory Specialist II Supervisor

Letter Number: 917A00026427


LEXINGTON MANAGEMENT GROUP, INC.

C/O CALER DONTEN LEVINE, ET AL
505 SOUTH FLAGLER DRIVE, SUITE 900
WEST PALM BEACH, FL 33401

January 4, 2018

To: Office of the Florida Secretary of State

I, Alice H. Hanley, as President of Lexington Management Group, Inc. (Florida document number F03000000628), do hereby consent to Lexington Management Group, LLC, a Delaware limited liability company, using the name Lexington Management Group, LLC to transact business in the State of Florida.



Alice H. Hanley, President
Lexington Management Group, Inc.

FILED
CLERK OF THE
STATE
OFFICE
9419 DEC 29 AM 8:36

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

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

2. Delaware 3. EIN: 82-3283940
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. No prior transactions
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 505 S. Flagler Drive, Suite 900 6. Same
(Street Address of Principal Office) (Mailing Address)
West Palm Beach, FL 33401

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company
Office Address: 1201 Hays Street
Tallahassee, Florida 32301
(City) (Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company in the place
designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with
and accept the obligations of my position as registered agent.

By: Roxanne Turner Roxanne Turner
Corporation Service Company Asst. Vice President
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>Chairman of Board</u>	<u>A. H. Hanley</u> <u>250 Jungle Road</u> <u>Palm Beach, FL 33480</u>	<u>Secretary</u>	<u>A. C. Woletsky</u> <u>9737 SW Santa Monica Dr.</u> <u>Palm City, FL 34990</u>
<u>Treasurer</u>	<u>F. N. Carducci</u> <u>51 Tuckahoe Ave.</u> <u>Eastchester, NY 10709</u>		

(Use attachments if necessary)

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)

10. 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.

A. H. Hanley
Signature of an authorized person
A. H. Hanley, Chairman of the Board and President
Typed or printed name of signee

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LEXINGTON MANAGEMENT GROUP, 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-EIGHTH DAY OF DECEMBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LEXINGTON MANAGEMENT GROUP, LLC" WAS FORMED ON THE SIXTH DAY OF SEPTEMBER, A.D. 1988.

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

REC'D
CORP. DIV.
DEC 29 AM 8:36



2171636 8300

SR# 20177829459

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


Jeffrey W. Bullock, Secretary of State

Authentication: 203849236

Date: 12-28-17