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CT CORPORATION SYSTEM	
Requestor's Name 660 East Jefferson Street	1000027363414
Address Tallabasses, FL 32301 222-1092	*****285.00 ****285.00
City State Man Zip	
CORPORATION(S) NAME	
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Acknowledgment	

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

LIMITED LIABILITY COMMING TO THE				
, Maronie Ir	famot	rion Services, L	_C_	 .
(Name of foreign limited liability co company" or their abbreviations "L.I	mpany must end L.C." or "L.C." if	with the words "limited liability con not so contained in the name at pres	npany" or "limite ent.)	:d
2. Delaware (Jurisdiction under the law of which		59-3549 660 liability (FEI number, if app	licable)	
company is organized)	a loloigh million	Perpetual		
4. (Date of Organization)	5.	(Duration: Year limited liability c cease to exist or "perpetual")	ompany will	
6. (Date first transacted l	Pariness in Florida	3. (See sections 608.501, 608.502 a	and 817.155, F.S.	.)
7. 3015 Harth	\sim 0	Svite 14		
Jacksonville	E FL (Street add	32357 Iress of principal office)		
8. List name, title, and business a will manage the foreign limited	ddress of each d liability comp	managing member [MGRM] or pany in Florida: (attach addition	manager [MG nal page if nec	iR] who essary)
NAME & ADDRESS:	TITLE:	NAME & ADDRESS:	TITLE:	
James O. Cole 110 SE 6th Street	MGR			
Fort Landerdale, F	+ {L 33301		-	r 66 SECI
Tort Lauderoale, +	MGR			RETAR OF C
3015 Howtley Rd.	· · · · · · · · · · · · · · · · · · ·		_	PHI PHI
Jacksonville, FL 32			_	RATIONS 12: 15
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^{9.} Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the Secretary of State or the proper official having custody of records in the state under the law of which it is organized. (A hotocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1.	The name of the Limited Liability Company is:		
_	Maronie Information Services, LL	<u>C</u>	
2.	The name and the Florida street address of the registered agent and office are:	J 66	SECI
	C T CORPORATION SYSTEM		도움 유로노
	(Name)		S 7.
	1200 South Pine Island Road	PM 12:	OF STAT RPORATI
	Florida street address (P.O. Box NOT ACCEPTABLE)	7	TENS
	Plantation FL 33324	_	
	(City/State/Zip)		

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

C T CORPORATION SYSTEM

(Signature)

VICKY GOLDSTEIN SPECIAL ASSISTANT SECRETARY

Filing Fee: \$35 for Designation of Registered Agent

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

7	he	undersigned member or authorized representative of a member of Maronie
I	<u>-</u>	formation Services, LLC deposes and says:
1)	the above named limited liability company has at least one member
2)	the total amount of cash contributed by the member(s) is \$ \(\frac{1}{2}\), \(\frac{1}{2}\), \(\frac{1}{2}\), \(\frac{1}{2}\)
3)	if any, the agreed value of property other than cash contributed by member(s) is \$ A description of the property is attached and made a part hereto.
4)	the total amount of cash or property anticipated to be contributed by member(s) is \$\loreq \loreq \l

Signature of a member or authorized representative of a member.
(In accordance with section 608.402(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

SECRETARY OF STATE
DIVISION OF CORPORATIONS

5) 1)

State of Delaware Office of the Secretary of State

PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "MARONIE INFORMATION SERVICES, 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 SEVENTH DAY OF JANUARY, A.D. 1999.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

Edward J. Freel, Secretary of State

AUTHENTICATION:

9509469

DATE:

2990037 8300