

**CORPORATE
ACCESS,
INC.**

236 East 6th Avenue . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

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Foreign LLC

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 MAR 17 PM 3:29

1.) Brothers Enterprises, LLC
(CORPORATE NAME & DOCUMENT #)

2.) _____
(CORPORATE NAME & DOCUMENT #)

3.) _____
(CORPORATE NAME & DOCUMENT #)

4.) _____
(CORPORATE NAME & DOCUMENT #)

5.) _____
(CORPORATE NAME & DOCUMENT #)

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|----------------|------------|
| Name | <u>317</u> |
| Availability | <u>OK</u> |
| Document | <u>OK</u> |
| Examiner | <u>OK</u> |
| Initiator | <u>OK</u> |
| Updater | <u>OK</u> |
| Verifier | <u>OK</u> |
| Acknowledgment | <u>OK</u> |
| W. P. Verifier | <u>OK</u> |

SPECIAL INSTRUCTIONS

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03/17/99-01001-024

****285.00 ****285.00

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FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

March 16, 1999

CORPORATE ACCESS

SUBJECT: BROTHERS ENTERPRISES, L.L.C.
Ref. Number: W99000006387

Corrected 3/17
NTC

We have received your document for BROTHERS ENTERPRISES, L.L.C. and your check(s) totaling \$285.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is not available. Therefore, the limited liability company must adopt an alternate name for use in the state of Florida. To adopt an alternate name the entity must submit a resolution signed by a managing member or manager adopting the alternate name for use in the state of Florida. The alternate name must end with "L.L.C.," "L.C.," "Limited Liability Company" or "Limited Company."

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

If you have any questions concerning the filing of your document, please call (850) 487-6020.

Tammi Cline
Document Specialist

Letter Number: 799A00012717

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

99 MAR 17 PM 3:15

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

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

- Brothers Enterprises d/b/a
1. DOUGHERTY & CONROY, L.L.C.
(Name of foreign limited liability company)
2. NEW JERSEY 3. 22-3638148
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. JANUARY 12, 1999 5. PERPETUAL
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6. UPON QUALIFICATION
(Date first transacted business in Florida. (Sec sections 608.501, 608.502, and 817.155, F.S.))
7. 225 W. 24TH STREET
NORTH WILDWOOD, NEW JERSEY 08260
(Street address of principal office)
8. List name, title, and business address of each managing member[MGRM] or manager[MGR] who will manage the foreign limited liability company in Florida: (attach additional page if necessary)

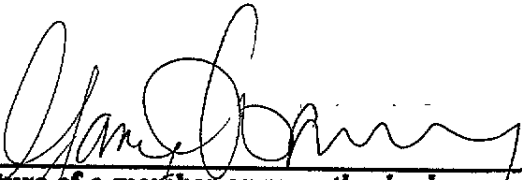
| NAME & ADDRESS: | TITLE: | NAME & ADDRESS: | TITLE: |
|---------------------------------|---------------|-----------------|--------|
| <u>GARY N. CONROY</u> | <u>MEMBER</u> | | |
| <u>610 W. BURK AVENUE</u> | | | |
| <u>WILDWOOD, N.J. 08260</u> | | | |
| <u>SEAN P. DOUGHERTY</u> | <u>MEMBER</u> | | |
| <u>225 W. 24TH STREET</u> | | | |
| <u>NORTH WILDWOOD, NJ 08260</u> | | | |
| <u>EDWARD J. DOUGHERTY</u> | <u>MEMBER</u> | | |
| <u>225 W. 24TH STREET</u> | | | |
| <u>N. WILDWOOD, NJ 08260</u> | | | |

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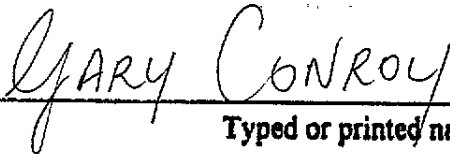
AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

The undersigned member or authorized representative of a member of _____
DOUGHERTY & CONROY, L.L.C. certifies:

- 1) the above named limited liability company has at least one member;
- 2) the total amount of cash contributed by the member(s) is \$ 5000.00;
- 3) if any, the agreed value of property other than cash contributed by member(s) is \$ N/A;
(A description of the property is attached and made a part hereto.)
and
- 4) the total amount of cash and property contributed and anticipated to be contributed
by member(s) is \$ 5000.00;
(This total includes amounts from 2 and 3 above.)



Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), Florida Statutes, the execution of this
affidavit constitutes an affirmation under the penalties of perjury that the facts
stated herein are true.)



Typed or printed name of signee

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Filing Fee: \$250.00 for Application and Affidavit

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:

DOUGHERTY & CONROY, L.L.C.

2. The name and the Florida street address of the registered agent and office are:

CORPORATE ACCESS, INC.

(Name)

236 E. 6TH AVENUE

Florida street address (P.O. Box **NOT** ACCEPTABLE)

TALLAHASSEE,

FL

32303

City/State/Zip

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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.


(Signature)

Filing Fee: \$ 35 for Designation of Registered Agent

STATE OF NEW JERSEY
DEPARTMENT OF TREASURY
SHORT FORM STANDING

BROTHERS ENTERPRISES, L.L.C.

*I, the Treasurer of the State of New Jersey,
do hereby certify that the above-named
New Jersey Domestic Limited Liability Company was
registered by this office on January 12, 1999.*

*As of the date of this certificate, said business
continues as an active business in good standing
in the State of New Jersey, and its Annual Reports
are current.*

*I further certify that the registered agent and
registered office are:*

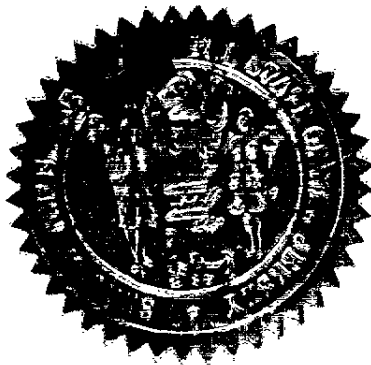
*Alan I Gould Esq
3000 Pacific Ave
Wildwood, NJ 08260*

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STATE OF NEW JERSEY
DEPARTMENT OF TREASURY
SHORT FORM STANDING

BROTHERS ENTERPRISES, L.L.C.

IN TESTIMONY WHEREOF, I have
hereunto set my hand and
affixed my Official Seal
at Trenton, this
10th day of March, 1999



James A. DiEleuterio, Jr.

James A DiEleuterio, Jr.
Treasurer