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PICK-UP WAIT MAIL	
(Business Entity Name)	
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Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	7
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Office Use Only



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10/21/04--01027--014 **160.00

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Sherry L. Reed, LLC (Name of Limited Liability Company)		
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transforda," Certificate of Existence, and check are submitted to register the above referenced for liability company to transact business in Florida		
Please return all correspondence concerning this matter to the following:		
Richard Reed		
(Name of Person)		
Sherry L. Reed, LLC		
(Firm/Company)		
1155 Brickell Bay Drive, Suite 1909		
(Address)		ب ،
Miami, FL 33131	04 001 21	25. 25. 25.
(City/State and Zip Code)	2	<u> </u>
For further information concerning this matter, please call:	PN 2: 05	
Richard Reed at (305) 533-1972	ထ	E.
(Name of Person) (Area Code & Daytime Telephone Nu	mber)	
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327		

Enclosed is a check for the following amount:

Tallahassee, Florida 32399

☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & ☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate

Certificate of Status Certified Copy of Status & Certified Copy

Tallahassee, Florida 32314

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

d Liabilit	ty Company)		
3 20	J-0582008		
, -· <u> </u>	(FEI number, if applicable)		
5 pe	erpetual		
(1	Duration: Year limited liability company v	vill cease	to
Florida, .S. to de	if prior to registration.) etermine penalty liability)		
1			
ss of Pri	incipal Office)		
ed com	ipany, check here 🗹		
anaginį	g members or managers are as follo	ws:	
9, Miami	ii, FL 33131	5	<u>.</u>
)9 Mian	ni Fl 33131	100	7,7 1,7 1,7
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authorist, F.S., th	ot acceptable. If the certificate is in a foreign		
y 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	5. per (e c c c c c c c c c c c c c c c c c c	(FEI number, if applicable) 5. perpetual (Duration: Year limited liability company vexist or "perpetual") Florida, if prior to registration.) S. to determine penalty liability) ss of Principal Office) ed company, check here	(FEI number, if applicable) 5. perpetual (Duration: Year limited liability company will cease exist or "perpetual") Florida, if prior to registration.) S. to determine penalty liability) ss of Principal Office) ed company, check here anaging members or managers are as follows:

Typed or printed name of signee

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	e of the Limited Liabi	ility Company is:	
Sherry L. Rec	ed, LLC		
2. The name	e and the Florida stree	et address of the registered agent and office are:	
	Richard A. Reed		
		(Name)	
	1155 Brickell Bay I	Drive, Suite 1909	
	Florida	la Street Address (P.O. Box NOT ACCEPTABLE)	
	Miami	FL 33131	\
•	•	City/State/Zip agent and to accept service of process for the above sta gnated in this certificate, I hereby accept the appointme	
agent and ag	gree to act in this capa he proper and complete	gnated in this certificate, I hereby accept the appointmentity. I further agree to comply with the provisions of a te performance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, Florida Sta	ll statutes :: l accept the
	(Signature)		ų į

\$ 100.00 Filing Fee for Application

\$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)

\$ 25.00 Designation of Registered Agent

OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE

I, Donetta Davidson, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

SHERRY L. REED LLC

is a Limited Liability Company

formed or registered on 01/09/2004 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20041009743.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 09/24/2004 that have been posted, and by documents delivered to this office electronically through 10/19/2004 @ 09:37:44.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Denver, Colorado on 10/19/2004 @ 09:37:44 pursuant to and in accordance with applicable law. This certificate is assigned Confirmation Number 6071792.



Secretary of State of the State of Colorado

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Certificate Confirmation Page of the Secretary of State's Web site, http://www.sos.state.co.us/bis/Certificate/SearchCriteria.do entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. http://www.sos.state.co.us/click Business Center and select "Frequently Asked Questions."