M14000003972

(Danisa Andre Norma)
(Requestor's Name)
(Address)
(Address)
A LIE TO
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
·
Special Instructions to Filing Officer:
3

Office Use Only



400260852624

2014 JUN -6 MM 89 56 SEGRETARY OF STATE ALLAHASSEE, FLORIDA

Section 1

JUN - 9 2014 T CLINE

RECEIVED

FLORIDA FILING & SEARCH SERVICES, INC. P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

6/6/14

NAME:

VIOLET (2013) LLC

TYPE OF FILING: APPLICATION

COST:

155.00

RETURN: CERTIFIED COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

Nan	ne of Limited Liability Company	,
	bility Company for Authorization to Transact Business in Flor above referenced foreign limited liability company to transact	
lease return all correspondence concerning this ma	atter to the following:	
Lynn Woerner		
	Name of Person	IJO.
Delaware Corpo	orate Services Inc.	
-	Firm/Company	
901 N Market S	St., Ste 705	
	Address	
Wilmington DE	19801	20 m
	City/State and Zip Code	
dcs@lawdeb.co	om	
	: (to be used for future annual report notification)	
or further information concerning this matter, plea	se call:	•
Lynn Woerner	302 \ 482-4271	
Name of Contact Person	Area Code Daytime Telephone Number	r
MAILING ADDRESS: Division of Corporations	STREET ADDRESS: Division of Corporations	
Registration Section P.O. Box 6327	Registration Section Clifton Building	
r.y. DOX 0347	Curron Banding	

Certificate of Status

Certified Copy

☐ \$160.00 Filing Fee, 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 RECESTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1. Violet (2013) 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.I.C," or "I.I.C.") , Delaware (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration.) to sections 605.0904 & 605.0905, F.S. to determine penalty liability) (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: 8. Attached is an original 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. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) Signature of an

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

	of the Limited Liability Company is:				
Violet (2	013) LLC				_
If unavailable,	the alternate to be used in the state of Florida is:				
			•	2200	20
2. The name and the Florida street address of the registered agent and office are:		4	ELAHA!		
Florida Filing & Search Services, Inc.			23.58 27.10	Ġ	
	(Name)		_	. FS	85 32
	155 Office Plaza Dr., Suite	Α			ည
	Florida Street Address (P.O. Box NOT AC	CEPTABLE)	_	# W.	
	Tallahassee RL 32301				
	City/State/Zin				

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 as provided for in Chapter 605, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "VIOLET (2013) 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 SIXTH DAY OF JUNE, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "VIOLET (2013)
LLC" WAS FORMED ON THE TWELFTH DAY OF AUGUST, A.D. 2013.

5381616 8300

140804730



AUTHENTICATION: 1430760

DATE: 06-06-14