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SHORETARY OF STATE

K. SALY EXAMINER

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COVER LETTER

	Registration Section Division of Corporatio	ns				
GIID IN C	-	Articulate A	Auctions LL	_C		
SUBJEC	1:		nited Liability Company			_
		reign Limited Liability C ed to register the above re				
Please retu	urn all correspondence	concerning this matter to	the following:			
	lan Hu	rlstone				
	<u> </u>		Name of Person			•
Articulate Auctions LLC						
	-		Firm/Company			•
	526 Kir	ngwood Dr.	#78			
			Address			•
	Kingwo	od, Texas	77339			
		Ci	y/State and Zip Code			
	articula	teauctions@	gmail.com	n		
	<u> </u>	E-mail address: (to be	used for future annual repo	ort notification	n)	-
For further	r information concernir	ng this matter, please call				
Í	lan Hurlsto	ne	713	469-0	0230	
_	Name	of Contact Person	Area Code		e Telephone Number	-
D R P	MAILING ADDRESS Division of Corporation Registration Section 2.O. Box 6327 Callahassee, FL 32314	s Divi Reg Clif 266	sion of Corporations istration Section on Building Executive Center Circahassee, FL 32301	:le		
	d is a check for the 3 \$125.00 Filing Fee	following amount: \$\Bigsirem\$ \$130.00 \text{ Filing Fee a Certificate of Status}\$			\$160.00 Filing Fee, C of Status & Certified	

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:

ability Company," "L.L.C," or "LLC.")	ose of transacting business in Florida. The alternate name must include "Limi
Texas	_{3.} 47-1371062
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
(Date first transacted bus (See sections 605.0904 & 60	siness in Florida, if prior to registration.) 05.0905, F.S. to determine penalty liability)
526 Kingwood Dr. #78	22 - 3
Kingwood, Texas 77339	EP 2
•	Address of Principal Office)
526 Kingwood Dr. #78	Fig. P.
Kingwood, Texas 77339	
Killywood, Texas 11339	
Kingwood, Texas 11339	(Mailing Address)
	(Mailing Address) ne person(s) who has/have authority to manage is/are:
. The name, title or capacity and address of than Hurlstone, Manager	
. The name, title or capacity and address of th	
The name, title or capacity and address of the an Hurlstone, Manager 526 Kingwood Dr. #78 Kingwood, Texas 77339 Attached is an original certificate of existence	ne person(s) who has/have authority to manage is/are: e, no more than 90 days old, duly authenticated by the office
The name, title or capacity and address of the an Hurlstone, Manager S26 Kingwood Dr. #78 Kingwood, Texas 77339 Attached is an original certificate of existence aving custody of records in the jurisdiction under the control of the	ne person(s) who has/have authority to manage is/are:

Typed or printed name of signee

Ian Hurlstone

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.

1. The name of the Limited Liability Company is:		
Articulate Auctions LLC		TSE TEST
If unavailable, the alternate to be used in the state of Florid	a is:	22 HASSEE.T
2. The name and the Florida street address of the registered	l agent and office are:	On the
REGISTERED AGENT	S INC.	
(Name)		•
3030 N. Rocky Point D	r., STE 150A	
Florida Street Address (P.O. Box No	OT ACCEPTABLE)	•
FL	33607	
City/State/Zip)	
Having been named as registered agent and to accept service liability company at the place designated in this certificate, I registered agent and agree to act in this capacity. I further a statutes relating to the proper and complete performance of accept the obligations of my position as registered agent as p Statutes. Da (Signature)	hereby accept the appointmagree to comply with the promy duties, and I am familia	ment as ovisions of ali ir with and 5, Florida
(Signature)		

Filing Fee for Application

Certified Copy (optional)
Certificate of Status (optional)

Designation of Registered Agent

\$ 100.00

\$ 25.00 \$ 30.00

5.00

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Articulate Auctions LLC (file number 802029189), a Domestic Limited Liability Company (LLC), was filed in this office on July 17, 2014.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on September 15, 2014.



Phone: (512) 463-5555

Prepared by: SOS-WEB

NANDITA BERRY

Nandita Berry Secretary of State