## M170000003164

(Requestor's Name)
(Address)
·
74.11
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Entity Name)
(Document Number)
Certified Copies Certificates of Status
<u></u>
Special Instructions to Filing Officer:
1017-30932
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Office Use Only

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> ELCRETARY OF STATE ALLAHASSEE, FLORIDA

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April 10, 2017

THERESA HOOPER HOMEWOOD SUITES GUEST 5325 AVION PARK DR TAMPA, FL 33607

SUBJECT: GLOBAL INFORMATION INTELLIGENCE LLC

Ref. Number: W17000030932

We have received your document for GLOBAL INFORMATION INTELLIGENCE LLC and your check(s) totaling \$130.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 30 days prior to the delivery of the application to the Department of State; duffy authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 817A00006842

## COVER LETTER

. .

TO: Registration Section

Div	Global Information							
SUBJECT:	- Indianation		Limited Liability	Company		•	-	
		reign Limited Liability Comed to register the above refer						
Please return	all correspondence	concerning this matter to the	following:					
	Theresa Hoop	er						
		N	and of Person					
	Homewood St	nites Guest						
Firm/Compans							•	
	5325 Avion Pa	ark Dr						
			Address			<u> </u>	. 21	
	Tampa, FI. 33	607					2017 ASS 10	77
	City/State and Zip Code  Cross  tmhooper@globalinfointel.com							
For further in	nformation concernit	E-mail address: (to be use ing this matter, please call:	d for future annua	l report not	tification)	10808 10808	P 1: 22	U
Ihe	areca Hooper		714 at (	331117	73	·		
<del></del>	Name	of Contact Person	Arca Code	/ Day	/time Telephone N	Number	•	
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Fallahassee, FL 32301						
	check for the follow 125.00 Filing Fee	ving amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filid Certified Copy	ng Fee &	□ \$160.00 Filir of Status & Cer			æ

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER A POREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

(If name unavailable, enter a	Itemate name adopted for the purpose of transactin	g business in Florida. The alternate	name must include "Limi	ited
Liability Company," I. L.C.		<b>-</b>		
2 Delawere	3. 27-35	548900	1 . 3	
company is organized)	of which foreign limited liability	(FEI number, if applica	.ntc)	
4	(Date first transacted business in Florida,	il minute manifestation (		
	(See sections 605.0904 & 605.0905, F.S. to	determine penalty liability)		
5. <u>6860 N Dallas Pkwy, ST</u>	E 200			
Plano, TX 75024				
<u> </u>				
6			——————————————————————————————————————	
				Order o
	(Mailing Address)			3]
7. Name and street addre	ss of Florida registered agent: (P.O. Box NO	$\Gamma$ acceptable)	- (SS) - 1	PLACES
Name	Registered Agents Inc.		ס ו	Π
Office Address:	3030 N. Rocky Point Dr. STE 150A			J
	Tampa	, Florida <u>3360</u> 7	22 10 A	
	(City)	(Zip code)		
designated in this applicato complywith the provisi	rgistered agent and to accept service of procestion, I hereby accept the appointment as regions of all statutes relative to the proper and comy position as registered agent.  (Registered agent's significant agent.	siered agent and agree to act in complete performance of my du	this capacity. I furthe	er agree
8. The name, title or cap:	acity and address of the person(s) who has/hav	e authority to manage is/are.		
	r, President, 6405 Landmark Trl, The Co	-		
Theresa Hooper, Se-	cretary/Sr. Executive, 6405 Landmark	Trl. The Colony, TX 7505	<del></del>	
<u> </u>	· · · · · · · · · · · · · · · · · · ·	,		
	of existence, no more than 90 days old, duly a of which it is organized. (If the certificate is in ubmitted)	n a fòreign language, a translatio	n of the certificate unde	
	$\neq$ . (a) $=$			
	Figurature of an authoriz	ed person		
	Figurature of an authorized in accordance with section 605.0203 (1) (b).	·		

Typed or printed name of signee

Emmanuel Hooper

Page 1

## Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "GLOBAL INFORMATION INTELLIGENCE 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 TENTH DAY OF APRIL, A.D. 2017.

The state of the s

Authentication: 202354553

Date: 04-10-17

4876864 8300 SR# 20172391642