m0700000165

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	idress)	
•	,	
	ty/State/Zip/Phone	- 4A
(C)	ty/Otaleszip/: Hom	o #)
PICK-UP	WAIT	MAIL
(Bu	ısiness Entity Nar	ne)
(Do	ocument Number)	
•		
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
		~ 0
<u> </u>		

Office Use Only



200087560982

02/07/07--01024--017 **160.00

07 FEB - 7 AM II: 43
SECRETATE OF STATE

COVER LETTER

Division of Corporations
SUBJECT: Nu Solutions International, LLC (Name of Limited Liability Company)
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida
Please return all correspondence concerning this matter to the following:
Margaret A. Young (Name of Person)
Nu Solutions International, LLC (Firm/Company)
5034 Barton Drive Address)
Orlando, FL 32807
For further information concerning this matter, please call:
Margaret Young at (407) 275-1016 (Name of Person) (Area Code & Daytime Telephone Number)
MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: \$\Begin{array}{cccccccccccccccccccccccccccccccccccc

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: (Jurisdiction under the law of which foreign limited liability company is organized) 26/2006 (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") + date: March 2007
(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability) 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: Margaret A. Young 5034 Barton Dr. Orlando, FL 3280 10. 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.) 11. Nature of business or purposes to be conducted or promoted in Florida: Target Wedding Y Signature of a member or an anthorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Manaret A. Young
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 of the Limited Liability Company is:		
Nu Solutions International, LLC	······································	
2. The name and the Florida street address of the registered agent and office are:		
Margaret A. Young (Name)	07 FEB SECRETA FALL AHA	
5034 Barton Drive Florida Street Address (P.O. Box NOT ACCEPTABLE)	-7 AHI SSEE EL	
Orlando, FL 32807 City/State/Zip	H: 43	う

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 608, Florida Statutes.

Margaret a houng
(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

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NU SOLUTIONS INTERNATIONAL, 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 THIRTIETH DAY OF JANUARY, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NU SOLUTIONS INTERNATIONAL, LLC" WAS FORMED ON THE TWENTY-SIXTH DAY OF APRIL, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.





4148600 8300 070098875

Varriet Smith Windsor, Secretary of State

AUTHENTICATION: 5395644

DATE: 01-30-07