

L1S000105223

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

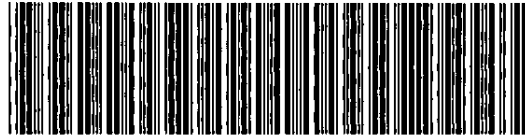
Special Instructions to Filing Officer:

Office Use Only

L1S000 29873

JUN 19 2015

T. SCOTT



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06/10/15--01003--024 **57.50

04/23/15--01010--019 **122.50

15 JUN 18 AM 10:37



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 28, 2015

HEATH KOLMAN
XIP CONSULTING, LLC
1451 W CYPRESS CREEK ROAD, STE 300
FT LAUDERDALE, FL 33309

SUBJECT: XIP CONSULTING, LLC
Ref. Number: W15000029873

We have received your document for XIP CONSULTING, LLC and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You have submitted the document and fees to form a Florida corporation; however, your name implies you wish to form a limited liability company. The name of a corporation cannot contain a limited liability company suffix. Limited Liability Company, L.L.C. and LLC are all limited liability company suffixes. The name of a corporation must contain Corporation, Corp., Incorporated, Inc., Company or Co.

Please correct the suffix or, if you wish to form a limited liability company, submit "Articles of Organization" along with the additional fee(s). Any fees previously submitted with your corporate filing will be applied to your limited liability company filing.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The Certificate of Conversion must be signed by an authorized person.

Please return the corrected original and one copy of 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) 245-6052.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 315A00008647

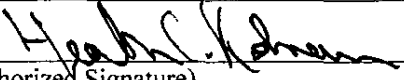
ARTICLES OF DOMESTICATION

In accordance with s. 605.1055, Florida Statutes, this certificate of domestication is submitted:

1. The date on which entity was first formed was July 19, 2005.
2. The name of the entity immediately prior to the filing of the Articles of Domestication was XIP Consulting, LLC.
3. The jurisdiction that constituted the seat, siege social, or principal place of business or central administration of the entity, or any other equivalent jurisdiction under applicable law, immediately before the filing of the Articles of Domestication was Commonwealth of Pennsylvania.
4. Attached are Florida articles of organization to complete the domestication requirements pursuant to s. 605.0201.
5. The domestication has been approved in accordance with the laws of the jurisdiction of formation of the domesticating entity:

I am Authorized Memmber, of XIP Consulting, LLC

and am authorized to sign this Articles of Domestication on behalf of the corporation and have done so this the 28 day of May, 2015.


(Authorized Signature)

6. Certificate of Status attached.

Filing Fee:

Articles of Domestication	\$ 25.00
Articles of Organization and Certified Copy	<u>\$ 125.00</u>
Total to domesticate and file	\$ 150.00

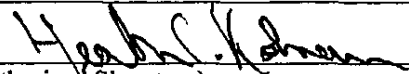
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

XIP Consulting, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

1451 W Cypress Creek Rd

Suite 300

Ft Lauderdale, FL 33309

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

REGISTERED AGENTS INC.

Name

3030 N. Rocky Point Dr., STE 150A

Florida street address (P.O. Box **NOT** acceptable)

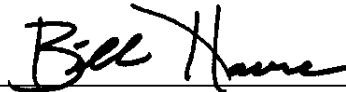
Tampa

FL 33607

City

Zip

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, F.S..



Bill Havre - President

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

Name and Address:

Heath Kolman

1451 W Cypress Creek Rd, Ste 300

Ft Lauderdale, FL 33309

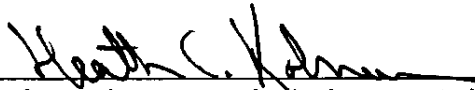
(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Heath C. Kolman

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)