

NOV-22-00 02:52 PM

FROM-AKERMAN SENTERFITT & EIDSON

+3053745095

T-656 P 01/04 E-292

M00000002389

Florida Department of State

Division of Corporations

Public Access System

Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H00000061518 7)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 922-4003

From: Angie Calabrese

Account Name : AKERMAN, SENTERFITT & EIDSON, P.A.

Account Number : 075471001363

Phone : (305) 374-5600

Fax Number : (305) 374-5095

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 NOV 22 PM 4:04

FILED

HL 11/22

FOREIGN LIMITED LIABILITY COMPANY

THE ULTIMATE SOLUTION GROUP, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 NOV 22 PM 3:18

RECEIVED

17354-095784

FAX AUDIT No.H00000061518

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

*IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN
LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:*

1. The Ultimate Solution Group, LLC
(Name of foreign limited liability company)
2. Delaware
(Jurisdiction under the law of which foreign limited liability company is organized)
3. Applied For
(FEI number, if applicable)
4. October 13, 2000
(Date of Organization)
5. Perpetual
(Duration: Year limited liability company will cease to exist or "perpetual")
6. Upon qualification to do business in Florida
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 1490 West 68 Street
Hialeah, FL 33014
(Street address of principal office)
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:

<u>ENRIQUE A. BELLO - 1490 West 68 Street</u>	<div>00 NOV 22 PM 4:04 FILED SECRETARY OF STATE TALLAHASSEE FLORIDA</div>
<u>Hialeah, FL 33014</u>	
<u>JOSE DIAZ - 1490 West 68 Street</u>	
<u>Hialeah, FL 33014</u>	
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: Any lawful business permitted under the laws of Florida.

Elizabeth Bello, Authorized person
Signature of a member or an authorized 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.)
Elizabeth Bello, Authorized person
Typed or printed name of signee

FAX AUDIT No.H00000061518

FAX AUDIT No.H00000061518

**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:

The Ultimate Solution Group, LLC

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

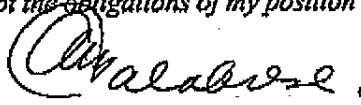
American Information Services, Inc.
(Name)

One Southeast 3rd Avenue, Suite 2800
Florida street address (P.O. Box **NOT** ACCEPTABLE)

Miami FL 33131
City/State/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 608, F.S.

By



(Signature)

Angelica M. Calabrese, Assistant Secretary

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

FAX AUDIT No.H00000061518

SECRETARY OF STATE
TALLAHASSEE FLORIDA

00 NOV 22 PM 4:04

FILED

FAX AUDIT No.H00000061518

State of Delaware
Office of the Secretary of State

PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "THE ULTIMATE SOLUTION GROUP, 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 TWENTY-SECOND DAY OF NOVEMBER, A.D., 2000.

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

FILED
00 NOV 22 PM 4:04
SECRETARY OF STATE
TALLAHASSEE FLORIDA



Edward J. Freel
Edward J. Freel, Secretary of State

AUTHENTICATION: 0810064

DATE: 11-22-00

3309613 8300

001587932

FAX AUDIT No.H00000061518