# M000000002692

ACCOUNTING/COMPUTERS/TAXES, INC.

LIVEGULE OF MEXICO DR., SUITE 207

LIONGBOAT KEY, FL 34228

MIH

Office Use Only

**Examiner's Initials** 

#### CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1.	00855-00(4)-0	0107)
	(Corporation Name)	(Document #)
2.	(Corporation Name)	(Document #) 600003453816
3.	(Corporation Name)	****125.00 ****125.00 (Document #) W - 2 W 858
4.	(Corporation Name)	(Document #)
	Walk in Pick up time Mail out Will wait	Certified Copy  Photocopy  Certificate of Status
	NEW FILINGS  Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS  Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger  OODITATION TO THE PROPERTY OF THE PROPER
<u>.</u>	OTHER FILINGS  Annual Report Fictitious Name	REGISTRATION/QUALIFICATION  Foreign Limited Partnership Reinstatement Trademark Other

CR2E031(7/97)



#### FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

November 9, 2000

ACCOUNTING/COMPUTERS/TAXES, INC. 4134 GULF OF MEXICO DR., SUITE 207 LONGBOAT KEY, FL 34228

SUBJECT: WILMARE SYSTEMS, LLC

Ref. Number: W00000026858

We have received your document for WILMARE SYSTEMS, LLC and your check(s) totaling \$125.00. 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 90 days prior to the delivery of the application to the Department of State, duly 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) 487-6967.

Michelle Hodges Document Specialist

Letter Number: 000A00058067

### APPLICATION BY FOREIGN LIMITED L'IABILITY 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: (Name of foreign limited liability company) (Jurisdiction under the law of which foreign limited liability company is organized)

3. (FEI number, if applicable) 4. August 14th, 2000
(Date of Organization) (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.) 7. 771 BINNACLE POINT DRIVE. 8. If limited liability company is a manager-managed company, check here 9. The usual business addresses of the managing members or managers are as follows: 171 BINNACLE BINT DRIVE Lengboot Key FL 34228. 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: ( STWAMET 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.). FABRICE ZAPHIRATO.

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.

Wilmare Sytems LLC
2. The name and the Florida street address of the registered agent and office are:
Theodore J. Wilson (Name)
4/34 bult of Mexico Brive #207 Florida street address (P.O. Box NOT ACCEPTABLE)
Longboat key FL 34228 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..

(Signature)

1. The name of the Limited Liability Company is:

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

## State of Delaware Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "WILMARE SYSTEMS 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 FIFTEENTH DAY OF DECEMBER, A.D. 2000.

3273864

8300

Edward J. Freel, Secretary of State

AUTHENTICATION: 0858210

001630452 DATE: 12-15-00