# MOIOCOCO2372 2-Steples 3600 Commene Bbd. 1955 immee, Pl 34741

Office Use Only

Examiner's Initials

CORPORATION NAME(S)	& DOCUMENT NUMBER(S),	(if known):
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1	
(Corporation Name)	(Document #)
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(Corporation Name)	(Document #)  4000045415143 -10/18/0101041003
3(Corporation Name)	-10/18/0101041003 ****310.00 ****155.00 (Document #)
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(Corporation Name)	(Document #)
☐ Walk in ☐ Pick up time	Certified Copy
☐ Mail out ☐ Will wait	Photocopy
NEW FILINGS	AMENDMENTS
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger  Amendment ALCR CRETARY OF SET OF FINANCE OF THE OFF SET OF THE OF
OTHER FILINGS	REGISTRATION/QUALIFICATION &
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other  Limited Partnership 10/23

#### 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. Contessa Monticino, LLC

(Name of foreign limited liability company)

2. Nevada (Jurisdiction under the law of which foreign limited liability

5.

3. 88-0507817 ( FEI number, if applicable)

4. 9/17/01 (Date of Organization)

company is organized)

Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")

6. Upon Registration (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)

#### 7. c/o Burton, Bartlett, & Glogovac, 50 W. Liberty Street, Ste. 650 Reno, NV 89501

(Street address of principal office)

- 8. If limited liability company is a manager-managed company, check here  $\underline{\mathbf{X}}$
- 9. The name and usual business addresses of the managing members or managers are as follows:

Richard W. Baker, 2535 Success Drive, Odessa, FL 33556 Roy M. Speer, 2535 Success Drive, Odessa, FL 33556 FL 34741 Johnston R. Staples, Ill, 3600 Commerce Boulevard, Kissimmee,

- 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:

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.)

Johnston R. Staples, III

retail sales?

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: **Contessa Monticino**, **LLC** 

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

Johnston R. Staples, III

(Name)

3600 Commerce Boulevard

Florida street address (P.O. Box NOT ACCEPTABLE)

Kissimmee, FL, 34741

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.

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(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **CONTESSA MONTICINO**, **LLC**, as a limited-liability company duly organized under the laws of **Nevada** and existing under and by virtue of the laws of the State of Nevada since September 17, 2001, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set by hand and affixed the Great Seal of State, at my office; in Carson City, Nevada, on September 17, 2007

Secretary of State

Certification Clerk