# M030000000649

| <u></u>                   |                   |           |
|---------------------------|-------------------|-----------|
| (Re                       | equestor's Name)  |           |
|                           |                   |           |
| (Ad                       | dress)            |           |
|                           |                   |           |
| (Ad                       | dress)            |           |
|                           |                   |           |
| (Cit                      | y/State/Zip/Phone | e #)      |
|                           |                   |           |
| PICK-UP                   | ☐ WAIT            | MAIL      |
|                           |                   |           |
| (Bu                       | siness Entity Nan | ne)       |
|                           |                   |           |
| (Do                       | cument Number)    |           |
| •                         | ,                 |           |
| Certified Copies          | Cortificates      | of Status |
| Ceranied Copies           | _ Cerdificates    | OI Olatus |
| <del></del>               |                   |           |
| Special Instructions to I | Filing Officer:   |           |
|                           |                   |           |
|                           |                   |           |
|                           |                   |           |
|                           |                   | ļ         |
|                           |                   |           |
|                           |                   |           |
|                           |                   |           |

Office Use Only



700011401137

02/11/03--01062--002 \*\*125.00

2003 FEB 24. AM 8: 40
DIVISION OF CORPORATION
ON AHASSEF FI ORIDA

LU03 - 4/10 J. BRYAN FEB 1 2 2003

#### TS.COM LLC

February 10, 2003

#### STATE OF FLORIDA

Dear Sir or Madam:

Please register my Delaware Corporation with the State of Florida. Enclosed please find necessary information and check.

Sincerely,

ROBERT BACH

OWNER

FILED 21 AN 8: 10
2003 FEB 21 AN 8: 10
DIVINION OF CORPORATIONS
DIVINION OF CORPERATIONS



#### FLORIDA DEPARTMENT OF STATE Ken Detzner Secretary of State

February 12, 2003

ROBERT BACH TS.COM LLC 3160 VINELAND RD., STE. 5A KISSIMMEE, FL 34746

SUBJECT: TS.COM LLC Ref. Number: W03000004110

We have received your document for TS.COM LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the name, title, and business address of each managing member or manager who will manage the foreign limited liability company in the state of Florida. Please insert "MGRM" in the title portion for each managing member and "MGR" in the title portion for each manager.

We retained your certificate from Delaware in our office.,

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) 245-6043.

Letter Number: 703A00009356

Joey Bryan Document Specialist district Mano Conceptions

## 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. TS. Com LLC  | <u> </u>   |
|---|------------|
| 1. /) · Com L-L (Name of foreign limited liability company)   |            |
| 2. STATE OF DE AWARE (Jurisdiction under the law of which foreign limited liability company is organized)  3. 27-603274/FEI number, if applicable)  4. 10-07-07-07-5. PerPetuA  | ŧ.         |
| 4. 10-07-07 (Date of Organization)  5. Perfectual  (Duration: Year limited liability company will cease to exist or "perpetual")  | <u>`</u>   |
| 6. 05-10-03 (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)  | !          |
| 7. SILOVINELAND PCD, SUITE 5 H.   |            |
| Ssimmee, FL 34746 (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:  |            |
| merm Robert Back  |            |
| 3160 VINEAUD RT, Suite 5A   |            |
| KISSIMMER FL 34746  |            |
|   |            |
| 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: TruesHARE LAND   |            |
| Real Estate   | <b>Á</b> 2 |
| I thell   |            |
| 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.)  |            |
| ROBERT BACH   |            |
| 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:  TS. COM LL C                     | A STATE OF THE STA |
|--|--|
| 2. The name and the Florida street address of the registered agent and office are: | The state of the s |
| ROBERT BACH (Name)   | FLORIDA<br>FLORIDA   |
| 3160 VINELAND PD, Surte 5A Florida street address (P.O. Box NOT ACCEPTABLE)        |  |
| SSIMMEE FL 34746 (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)

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

## Delaware

#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TS.COM 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 FOURTH DAY OF FEBRUARY, A.D. 2003.





Farriet Smith Hindson
Harriet Smith Windson, Secretary of State

AUTHENTICATION: 2242563

3576952 8300

DATE: 02-04-03

030074956