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(Req	uestor's Name)	
(Add	lress)	
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(City	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL.
(Bus	iness Entity Nar	me)
- (Doc	ument Number)	
Certified Copies	<u>Certificates</u>	s of Status
Special Instructions to F	iling Officer:	

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FILED TRANSMITTAL LETTER TO: Registration Section 03 OCT 13 AM 10: 30 **Division of Corporations** Public Company Solutions (Name of limited liability company - must include suffix) Dear Sir or Madam: The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida", "Designation of Registered Agent", "Certificate of Existence" and check are submitted to register the above referenced foreign limited liability company to transact business in Florida. Please return all correspondence concerning this matter to the following: John D. Brasher Jr. (Name of Person) (Firm/Company) 2324 SW 11244 Street (Address) (O-a) nesville, FLorida 32607 (City/State and Zip code) For further information concerning this matter, please call: (Name of Person) (Name of Person) (Area Code & Daytime Telephone Number) **MAILING ADDRESS:** STREET ADDRESS:

Registration Section Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Enclosed is a check for the following amount:

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

\$160.00 TOTAL

Registration Section

409 E. Gaines St.

Division of Corporations

Tallahassee, FL 32399

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO LED TRANSACT BUSINESS IN FLORIDA 03 007 13 AM II

	COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN
	ATTED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1.	PUBLIC COMPANY SOLUTIONS LLC (Name of foreign limited liability company)
	(Name of foreign limited liability company)
2	(olorado 3. 75-3102603
(Colorado Jurisdiction under the law of which foreign limited liability company is organized) 3. 75-3102603 (FEI number, if applicable)
4	3-04-03 : Perpetual
7.	(Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")
6.	(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)
٠.	(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)
7.	2324 SW 112th Street
	2324 SW 112th Street Gainesville, FL 32607 (Street address of principal office)
	(Street address of principal office)
	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:
	Law D. Pareum La
	2324 SW 112th Street, Gainesville, FL 32607
	Pandel Sacari
	90 Madison Street, Suite 707, Denver, CD 80206
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: oftens web-based
	database hosting
	Solin SOI
	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.)
	Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PUBLIC COMPANY SOLUTIONS LLC

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2. The name and the Florida street address of the registered agent and office are:	
John D. Brasher Jr.	
(Name)	
2324 SW 112th Street	
Florida street address (P.O. Box NOT ACCEPTABLE)	
Gainesville FL 32607	
(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.

STATE OF FLORIDA.

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)



FILED 03.007.13 AM 10: 30

STATE OF COLORADO

DEPARTMENT OF STATE CERTIFICATE

I, DONETTA DAVIDSON, Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

PUBLIC COMPANY SOLUTIONS LLC (Colorado LIMITED LIABILITY COMPANY) File # 20031069981

was filed in this office on March 4, 2003 and has complied with the applicable provisions of the laws of the State of Colorado and on this date is in good standing and authorized and competent to transact business or to conduct its affairs within this state.

Dated: September 25, 2003

For Validation:

Certificate ID: 712522

To validate this certificate, visit the following web site, enter this certificate ID, then follow the instructions displayed.

www.sos.state.co.us/ValidateCertificate

Donetta Davidson SECRETARY OF STATE