## M0400005119

| (Re                     | equestor's Name)     | <u></u>             |
|-------------------------|----------------------|---------------------|
| (Ad                     | ldress)              | <del>- 1 mu .</del> |
| (Ad                     | ldress)              |                     |
| (Cit                    | ty/State/Zip/Phone # | <u> </u>            |
| PICK-UP                 | ☐ WAIT               | MAIL                |
| (Bu                     | siness Entity Name   | )                   |
| (Do                     | cument Number)       | ·                   |
| Certified Copies        | Certificates of      | Status              |
| Special Instructions to | =                    | C                   |
|                         |                      |                     |

Office Use Only



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## 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. WEXMAR ARE LLC

| 1.      | (Name of foreign limited liability company)  |          |
|---------|--|----------|
| _       |  |          |
| 2.<br>( | Nevada 3. 20-1519599 (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)  | -        |
|         | company is organized)  |          |
| 4.      | (Date of Organization)  5.   Cerpetua    (Duration: Year limited liability company will cease to exist or "perpetual")   | -        |
|         | exist of perpetual )   |          |
| 6.      | (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)   | -        |
| 7.      | . II.  | _        |
|         | SAINT PETERS burg F1 33713  (Street address of principal office)   |          |
|         | (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:  |          |
|         | The name and usual business addresses of the managing members or managers are as follows:  |          |
|         | 4300 6Th AUE NORTH   | -        |
|         |  |          |
|         | SAINT PETERS BURG FIA 337/3  | <u>.</u> |
|         | <u> </u>   | _        |
| 10.     | . Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of re  | cords in |
|         | the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language   | e, a     |
|         | translation of the certificate under eath of the translator must be submitted.)  |          |
| 11.     | . Nature of business or purposes to be conducted or promoted in Florida: Construction Ser  | nces.    |
|         | General Activity   |          |
|         |  |          |
|         | 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.) |          |
|         | JUSTIN MARIZ   |          |
|         | Typed or printed name of signee  |          |

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

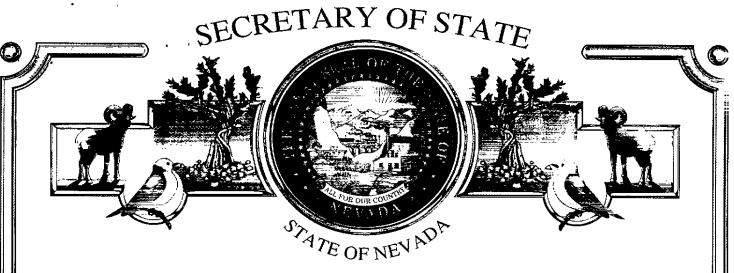
PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

| 1. | The name of the Limited Liability Company is:                                   |
|----|---|
|    | WEXMAR LLC  |
| 2. | The name and the Florida street address of the registered agent and office are: |
|    | JUSTIN MARTZ (Name)   |
|    | 4300 672 AUE NOTTL<br>Florida street address (P.O. Box NOT ACCEPTABLE)          |
|    | SAINT PETERSburgFL 33713 (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 obligation 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)



## 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, **WEXMAR**, **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 **August 24, 2004**, and is in good standing in this state.

Ву

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Las Vegas, Nevada, on **August 24, 2004**.

DEAN HELLER
Secretary of State

Certification Clerk

