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	(Requestor's Name)
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☐ PIC	(City/State/Zip/Phone #) K-UP
	Business Entity Name)
Certified Copies	(Document Number) Certificates of Status
Special Instruc	tions to Filing Officer:
<u> </u>	Office Use Only



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1	TRANSMITTAL LETTER
TO: Re	egistration Section
ιþi	vision of Corporations
	Coeta Pican Giffe LLC
SUBJEC	Costa Rican Gifts LLC.
	(Name of Limited Liability Company)
The enclo	sed "Application by Foreign Limited Liability Company for Authorization to Transact Business in
Florida,	Certificate of Existence, and check are submitted to register the above referenced foreign limited
liability c	ompany to transact business in Florida
Please ret	urn all correspondence concerning this matter to the following:
	(Name of Person)
	Patrick Vivies, CPA, PA
	(Firm/Company)
	700 E. Dania Beach Blvd #202
	(Address)
:	
	Dania, FL 33004
	(City/State and Zip Code)
For further	er information concerning this matter, please call:
1 Of Turtific	i mormation concerning this matter, please eart.
M	ichael Daniel Lynch at (340) 626-4030
Ì	(Name of Person) (Area Code & Daytime Telephone Number)
ST	TREET ADDRESS: MAILING ADDRESS:
,	egistration Section Registration Section
	vision of Corporations Division of Corporations
Dji	9 E, Gaines Street P.O. Box 6327
40	
40	llahassee, Florida 32399 Tallahassee, Florida 32314
40 Ta	
40 Ta	is a check for the following amount: Tallahassee, Florida 32314
40 Ta Enclosed	is a check for the following amount: \$125.00 Filing Fee \$\Bigsup \$130.00 Filing Fee & \$\Bigsup \$155.00 Filing Fee & \$\Bigsup \$160.00 Filing Fee, Certificate
40 Ta Enclosed	is a check for the following amount:
40 Ta Enclosed	is a check for the following amount: \$125.00 Filing Fee \$\Bigsup \$130.00 Filing Fee & \$\Bigsup \$155.00 Filing Fee & \$\Bigsup \$160.00 Filing Fee, Certificate

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: Costa Rican Gifts LLC (Name of Foreign Limited Liability Company) 2. Delware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 5. Perpetual October 29, 2004 (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") October 29, 2004 (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 941 NW 2nd Avenue (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: Ronald Craig Ramsey- 941 NW 2nd Avenue, Boca Raton, FL 33432 Michael Daniel Lynch- 941 NW 2nd Avenue, Boca Raton, FL. 33432 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: Wooden Souvenirs 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

Michael Daniel Lynch

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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		NS OF SECTION 608				
UNDERSIGN	ED LIMITED LIAB	ILITY COMPANY SI	JBMITS T	HE FOLLOWING	G STATEMENT	ſ
TO DESIGNA	ATE A REGISTEREI	OFFICE AND REG	ISTERED A	GENT IN THE	STATE OF	
FLORIDA.		!	4.			
1						
:		•				
1. The name	of the Limited Liabil	ity Company is:				
	20°-110					
Costa Rican G	ITTS LLC.	:				
i-	<i>4</i> ·=	1	1	-		
2. The name	and the Florida street	address of the registe	ered agent a	and office are:		
į						
:	' Michael Desiel I	1				
 	Michael Daniel Lyn					
,		(Name)		· 		
i	941 NW 2nd Avenu	ie Ie				
-	Florida	Street Address (P.O. Box	NOT ACCE	TABLE)		
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		1				
ì	Boca Raton	, FL	33432			
;		City/State	/Zip		O4 NOV	E CHICAGO
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		gent and to accept seri) " (
liability compo	any at the place design	nated in this certificate	, I hereby d	accept the appoint	tment as register	ed
		ity. I further agree to				فنينت
		performance of my du				

obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

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

PAGE 1

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "COSTA RICAN GIFTS 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 FIRST DAY OF NOVEMBER, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "COSTA RICAN GIFTS LLC" WAS FORMED ON THE FOURTH DAY OF OCTOBER, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.



Varriet Smith Hindson

AUTHENTICATION: 3448333

-DATE: 11-01-04

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