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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: BELAMI GROUP LLC	
50202031	ted Liability Company)
	bility Company for Authorization to Transact Business in omitted to register the above referenced foreign limited
Please return all correspondence concerning this ma	atter to the following:
BASSEM DIBBS	7 S T
(Nan	ne of Person)
(Firm	n/Company)
402 S. ARMENIA AVE., STE. # 129 C	D(''
	Address)
TAMPA, FL 33609	
(City/Sta	te and Zip Code)
For further information concerning this matter, plea	ise call:
BASSEM DIBBS	at (813) 251-1999
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET ADDRESS: Registration Section	MAILING ADDRESS: Registration Section
Division of Corporations	Division of Corporations
409 E. Gaines Street Tallahassee, Florida 32399	P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount:	
□ \$125.00 Filing Fee □ \$130.00 Filing Fee & Certificate of \$	☐ \$155.00 Filing Fee & ☑ \$160.00 Filing Fee, Certificate Status Certified Copy of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	BELAMI GROUP LLC
	(Name of Foreign Limited Liability Company)
Ŀ.	DELAWARE 3. 80-0084428
	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4.	DECEMBER 08, 2003 5. PERPETUAL
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6.	
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7.	402 SOUTH ARMENIA AVENUE, SUITE # 129 C
	TAMPA, FL 33609
	(Street Address of Principal Office)
8.	(Street Address of Principal Office) If limited liability company is a manager-managed company, check here The name and usual business addresses of the managing members or manager are as fall of the state of the managing members or manager are as fall of the state of the sta
9.	The name and usual business addresses of the managing members or managers are as follows:
	BASSEM DIBBS
	402 S. ARMENIA AVE., STE. # 129 C
	TAMPA, FL 33609
h ra	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in ejurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a inslation of the certificate under oath of the translator must be submitted.)
11	. Nature of business or purposes to be conducted or promoted in Florida: MARKETING CO.
	Signature of a member or ab authorized representative of a member. (thr acyordance 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.) BASSEM DIBBS

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.

 The name of the Limited Liability Comp 	pany i	S
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2. The name and the Florida street address of the registered agent and office are:

BASSEM	DIBBS	<u>_</u>	. 0	
	(Name)		5 <u>J</u>	
402 S. ARMENIA AVE., STE. # 129 C		HASS) 	orazani Grazani
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	Ms	-	
TAMPA	FL 33609	FLOR	- -	The same
City/State/Zip		- DA		

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, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

PAGE

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BELAMI GROUP 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 THIRTEENTH DAY OF JULY, A.D. 2005.



Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 4016862

DATE: 07-13-05

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