M06000000831

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, , ,
(Document Number)
(2004)11011111111111111111111111111111111
Certified Copies Certificates of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

700065146197

02/03/06--01055--021 **160.00

SECRELARIAN STATE

Office Use Only

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Todd Jones LLC			
(Name of	of Limited Liability Company)		
	ted Liability Company for Authorization to Transact Business in are submitted to register the above referenced foreign limited rida		
Please return all correspondence concerning	this matter to the following:		
Todd Jones			
(Name of Person)			
	(Firm/Company)		
6314 Lenaking Ave	;		
	(Address)		
Las Vegas, NV 891	122		
	City/State and Zip Code)		
For further information concerning this matt	ter, please call:		
Todd Jones	at (702) 528-1758		
(Name of Person)	(Area Code & Daytime Telephone Number)		
MAILING ADDRESS:	STREET ADDRESS:		
Division of Corporations	Division of Corporations		
P.O. Box 6327	Clifton Building		
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301		
Enclosed is a check for the following amoun ☐\$125.00 Filing Fee ☐\$130.00 Filing			

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:

	Limited Liability Company)
Nevada (Jurisdiction under the law of which foreign limited company is organized)	liability 3. (FEI number, if applicable)
April 1, 2005 (Date of Organization)	5. 12/31/2098 (Duration: Year limited liability company will cease to exist or "perpetual")
(Date first transacted busing (See sections 608,501 & 60) 10411 Hart Branch Circle Orland	ness in Florida, if prior to registration.) 8.502 F.S. to determine penalty liability)
	t Address of Principal Office)
3. If limited liability company is a manager-n	2:
Todd Jones 6314 Lenaking Ave Las	the managing members or managers are as follows: S Vegas, NV 89122
ne jurisdiction under the law of which it is organized. (A	re than 90 days old, duly authenticated by the official having custody of record photocopy is not acceptable. If the certificate is in a foreign language, a ust be submitted.)
he jurisdiction under the law of which it is organized. (A ranslation of the certificate under oath of the translator manufacture of the translator manufacture of the certificate under oath of the translator manufacture.)	photocopy is not acceptable. If the certificate is in a foreign language, a

Typed or printed name of signee

Julie Jones

FLEMING

PAGE 01/01

702-898-4792

P.2

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:

Todd Jones LLC	······································
2. The name and the Florida street address of the registered agent and office are:	06 FE SECN TALLL
Chad Flemming	EB-3 PA
(Name)	SSS
226. S. Frederick Ave. Florida Street Address (P.O. Box NOT ACCEPTABLE)	FE0
Daytona Beach FL 32114	RIDA
City/Russ/Zip	

Having been named as registered agent and to accept service of process for the above stated limited liability company as 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.

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

Certificate of Status (optional) 5.00

SECRETARY OF STATE



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, non-profit corporations, corporation soles, 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, **TODD JONES**, **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 April 1, 2005, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on December 12, 2005.

DEAN HELLER Secretary of State

Ву

Certification Clerk