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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Action Sales & MARKETING LLC (Name of Limited Liability Company)
The enclosed "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 company to transact business in Florida.
Please return all correspondence concerning this matter to the following:
LYUCM VLA NORGART Action SALES & MARKETING 2LC 4213 SALTWATER BL
(Firm/Company)
4213 SALTWATER BLE
(Address)
TAMOS FL 33615 88
(City/State and Zip Code)
For further information concerning this matter, please call:
Rick Noncart at 813, 600-5483 (Name of Person) (Area Code & Daytime Telephone Number)
MAILING ADDRESS: Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 Enclosed is a check for the following amount: D\$\$125.00 Filing Fee D\$\$130.00 Filing Fee & Certificate of Status Certificate of Status STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Enclosed is a check for the following amount: Certificate of Status Certificate Copy Of Status & Certified Copy

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

IN COMPLIANC	E WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIG TYCOMPANYTOTRANSACT BUSINESS IN THE STATE OF FLORIDA:	N
	IUN SALES & MANKETING LLC (Name of Foreign Limited Liability Company)	
2. 5777 (Jurisdiction u company is or	TE OF NEVADA 3. 13-4203260 Inder the law of which foreign limited liability (FEI number, if applicable)	
4 <i>U</i>	(Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")	
6	NONE	,
7. <u>4.</u>	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 213 SALTWATEN BL	
	TAMPA, FL 33615 ES 3 TO (Street Address of Principal Office)	N
8. If limited l	iability company is a manager-managed company, check here	
9. The name:	and usual business addresses of the managing members or managers are as follows: 🥰 🙎	
Lyt	Idmy/A NoncAnt	
421	Idmy/A NorcAnt	
4213	AMY/A NORCANT SALTWATER BL TAMPA, FL 336/J	
4213 10. Attached is a the jurisdiction u	CLMY/A NORGART 3 SALTWATER BL TAMPA, FL 336/J In original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in original certificate is in a foreign language, a certificate under oath of the translator must be submitted.)	
10. Attached is a the jurisdiction utranslation of the	SALTWATER BL THOMPA, FL 336/J In original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in original certificate under oath of the translator must be submitted.) Thus in each of the translator must be submitted.	
10. Attached is a the jurisdiction utranslation of the	SALTWATER BL THINGA, FL 336/J noriginal certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a certificate under oath of the translator must be submitted.) To business or purposes to be conducted or promoted in Florida:	

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: ACTION SALES & MANKETING LLC
2. The name and the Florida street address of the registered agent and office are: LYUCMY A LONGART (Name) HAB SALTWATER BL Florida Street Address (P.O. Box NOT ACCEPTABLE) TAMPA FL 336/5 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, 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)

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, ACTION SALES & MARKETING, 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 July 10, 2002, 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 March 20, 2006.

DEAN HELLER Secretary of State

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Certification Clerk