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#### **COVER LETTER**

TO: **Registration Section Division of Corporations** 

### SUBJECT: Tallahassee Therapeutic Healing Center, L.L.C.

(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:

**Brenda Reshard** 

(Na	me of Person)			
Tallahassee Therapeuti	c Healing (	Center	r, L.L.C.	
(Fir	m/Company)		, <u>,</u>	
8934 Reshard Lane				
	(Address)			
Tallahassee, Florida 32	309			
(City/Sta	ate and Zip Code	e)		
For further information concerning this matter, plea	ase call:			
Brenda Reshard	at ( 850	, 284-	8062	
(Name of Person)	(Area Code	& Dayti	me Telephone Number)	
MAILING ADDRESS:	STREET ADDRESS:			
Division of Corporations	Division of Corporations			
P.O. Box 6327	Clifton Building			
Tailahassee, FL 32314	2661 Executive Center Circle			
	Taliahassee, Fi	L 32301		
Enclosed is a check for the following amount:  \$\sum_\$125.00 \text{ Filing Fee} \sum_\$130.00 \text{ Filing Fee &}\$	□\$155.00 Filin	a Fan A	[7] \$160.00 Eiling Eng Contificate	
Certificate of		ig ree & tified Copy	\$160.00 Filing Fee, Certificate of Status & Certified Copy	

## 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. Tallahassee Therapeutic Healing Center, L.L.C.
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")
Brenda Reshard Newada 3, 20-8846818
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4. April 5, 2007 5. perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
<sub>5.</sub> July 18, 2007
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
1989 Capital Circle N.E. Suite 9
Tallahassee, Florida 32308
(Street Address of Principal Office)
3. If limited liability company is a manager-managed company, check here
2. The name and usual business addresses of the managing members or managers are as follows:
Brenda Keshard, Lloyd Reshard, Clinton
Reshard and Coby Mclam
8934 Reshard Lane, Tallahassee, Fl 32309
0. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in
he jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a
ranslation of the certificate under oath of the translator must be submitted.)
1. Nature of business or purposes to be conducted or promoted in Florida: Far-Infrared (FIR)/
Radiant Heat Therapy, sale of related FIR products and Food Supplements.
Beefy Reshan
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.)
Brenda Reshard
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:
Tallahassee Therapeutic Healing Center, L.L.C.
If name unavailable, the alternate name to be used in the state of Florida is:
2. The name and the Florida street address of the registered agent and office are:    Brinda   Lashard     Tallahassee Therapeutic Healing Center, L.L.C. (Name)    1989 Capital Circle N.E. Suite 9     Florida Street Address (P.O. Box NOT ACCEPTABLE)    Tallahassee   FL     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.

nature)

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

TILEU

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ECRETARY OF STATE
LLAHASSEF, FLORIO.

SECRETARY OF STATE



#### CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, 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, TALLAHASSEE THERAPEUTIC HEALING CENTER, L.L.C., 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 5, 2007, 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 July 11, 2007.

> **ROSS MILLER** Secretary of State

Certification Clerk