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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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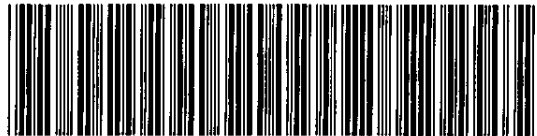
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PARRISH DEVELOPMENT, 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:

Christopher E. Broome, Esq.

(Name of Person)

THE BROOME LAW FIRM, P.A.

(Firm/Company)

915 South Washington Avenue

(Address)

Titusville, FL 32780

(City/State and Zip Code)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

Christopher E. Broome

(Name of Person)

at (321) 269-5620 ext. 6

(Area Code & Daytime Telephone Number)

MAILING ADDRESS:

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☒ \$130.00 Filing Fee &

Certificate of Status

☐ \$155.00 Filing Fee &

Certified 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. Name of foreign limited liability company: PARRISH DEVELOPMENT, LLC
2. Jurisdiction under the law of which foreign limited liability company is organized: Colorado
3. FEI number, if applicable: 861133701
4. Date of organization: 3/27/2005
5. Duration: Perpetual
(Year limited liability company will cease to exist, or "perpetual")
6. Date first transacted business in Florida, if prior to registration: None
(See sections 608.501 & 608.502, to determine penalty liability)
7. Street address of principal office: 1555 Garden Street, Titusville, Florida 32796
8. This limited liability company is a member managed company.
9. The name and usual business addresses of the managing members or managers are as follows:

NAME & ADDRESS: Johann Robbins
3910 L
Colorado Avenue,
Boulder, CO 80303

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: Any and all lawful business.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA


Johann Robbins
Member & President

**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:

PARRISH DEVELOPMENT, LLC

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:

Christopher E. Broome, Esq.

(Name)

915 South Washington Avenue

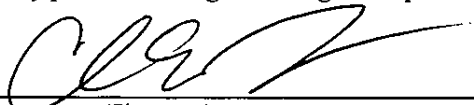
Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Titusville, FL 32780

City/State/Zip

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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) |



STATE OF COLORADO

DEPARTMENT OF
STATE

CERTIFICATE

I, MIKE COFFMAN, SECRETARY OF STATE OF THE STATE OF
COLORADO HEREBY CERTIFY THAT ACCORDING TO THE RECORDS OF
THIS OFFICE

PARRISH DEVELOPMENT LLC
(COLORADO LIMITED LIABILITY COMPANY)

BECAME ORGANIZED UPON FILING ARTICLES OF ORGANIZATION
DATED MARCH 27, 2005.

Dated: January 22, 2008

SECRETARY OF STATE