# M0800001065

(Requestor's Name)		
(Address)		
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PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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Special Instructions to Filing Officer:		
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SECRETARY OF STATE

FILED

#### **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: MIMI VAN G	ted Liability Company)
The enclosed "Application by Foreign Limited Liab	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:
	he of Person)
MıMı (Fin	vang LLC n/Company)
	•
	Address)
EN 6 LEWS	oo FL 34223  Ite and Zip Code)
(City/Sta	ate and Zip Code)
For further information concerning this matter, plea	se call:
John Goddard	at (941) 716 8556
(Name of Person)	(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:  \$\Bigsim \mathbb{\text{\$125.00 Filing Fee}} \Bigsim \mathbb{\text{\$\$130.00 Filing Fee & Certificate of Status}}\$	□ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate Certified Copy 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: (Name of Foreign Limited Liability Company) (Jurisdiction under the law of which foreign limited liability)

3. 26-1921382.

(FEI number, if applicable) company is organized) (Date of Organization) (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 10/ CALIPORNIA ST Suite 2450 SAA FRANCISCO CA 9411. 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: A GODDARD 101 CALIFORNIA: ST Suit 2450 SAN FRANCISCO? CA 94111 10. Attached is an original cartificate 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: 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.)

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.	1. The name of the Limited Liability Company is:		
	MIMI VANG LLC		
2.	2. The name and the Florida street address of the registered agent and office are:		
	Juhn Goddand (Name)		
·	Florida Street Address (P.O. Box NOT ACCEPTABLE)		
	ENGleword FL 3423 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.

(Signature)

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

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#### **State of California**

Secretary of State

## CERTIFICATE OF GOOD STANDING CALIFORNIA LIMITED LIABILITY COMPANY

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

That on the **6th day of February, 2008, MIMI VANG LLC**, became recognized under the laws of the State of California by filing its Articles of Organization in this office; and

That according to the records of this office, the said limited liability company is authorized to exercise all its powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition of this limited liability company.

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of February 25, 2008.



Jeha Bowen

**DEBRA BOWEN Secretary of State** 

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SECRETARY OF STATE
ALASSEE FLOSION

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