

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer: L. SELLERS
APR 3 0 2008
EXAMINER
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SECRETARY OF STATE ALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: VIOLET PROPERTIES L	LC
	ted Liability Company)
	oility 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:
RHONA BENEDICT	
(Nar	ne of Person)
VIOLET PROPERTIES I	LLC
(Firm	n/Company)
18911 COLLINS AVE S	UITE 707
(Address)
SUNNY ISLES BEACH,	
(City/Sta	te and Zip Code)
For further information concerning this matter, plea	se call:
RHONA BENEDICT	_at (305) 466-2812
(Name of Person)	(Area Code & Daytime Telephone Number)
MAILING ADDRESS: Division of Corporations	STREET ADDRESS: Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: \$\Begin{align*}\text{\$125.00 Filing Fee} & \Begin{align*}\text{\$130.00 Filing Fee} & \text{\$Certificate of States} & \text{\$130.00 Filing Fee} &	\$\bigsize \\$155.00 \text{ Filing Fee & \subseteq \\$160.00 \text{ Filing Fee, Certificate} \\ Status \text{Certified Copy} \text{of Status & Certified Copy} \]



April 16, 2008

RHONA BENEDICT 18911 COLLINS AVENUE, STE. 707 SUNNY ISLES BEACH, FL 33160

SUBJECT: VP LLC

Ref. Number: W08000019394

We have received your document for VP LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper, that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

The enclosed WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA must be completed.,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Letter Number: 908A00022717

Leslie Sellers Regulatory Specialist II

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

INITED LIABILITY CONT. A	INTTO TRAINSACT DOSINESS IN THE	E STATE OF PLONIDA.	
VIOLET PRO	PERTIES LLC		
•		lude "Limited Liability Company," "L.L.C.,"	or "LLC.")
VPLLC	-		
f name unavailable, enter	alternate name adopted for the purp	ose of transacting business in Florida and atta	ch a copy of the written
onsent of the managers or ompany," "L.L.C.," "LLC	managing members adopting the alt	ternate name. The alternate name must include	"Limited Liability
		E4 0183818	
STATE OF M	w of which foreign limited liability	3. 54-2183818 (FEI number, if applicable	
company is organized)	w of which foleign infined habinty	(PEI Rumber, ii applicable	-)
09/16/2005		5. PERPETUAL	
(Date of C	Organization)	(Duration: Year limited liability compar	ny will cease to
		exist or "perpetual")	
((Date first transacted business in F See sections 608.501 & 608.502 F.S	florida, if prior to registration.) S. to determine penalty liability)	
	INS AVE SUITE 70		
10311 OOLL	IIVO AVE GOTTE TO		<u></u>
SUNNY ISLE	ES BEACH, FL., 33 ⁻	160	
	(Street Addres	s of Principal Office)	
If limited liability of	ompany is a manager-manage	d company check here	
. If illinica hability co	Impairy is a manager-manage	d company, eneck nero	
. The name and usual	business addresses of the ma-	naging members or managers are as fo	ollows:
Plans	Dana		
RHONA	BENLOICE		
18911 Call	ins Ave # 70	フ	
Lunny	Isles Beach	, rx 33/60	
σ			
•		Odays old, duly authenticated by the official hav opy is not acceptable. If the certificate is in a fore	-
•	vol which it is organized. (A photocol ander oath of the translator must be sub	**	ngn miguage, a
٠		0 /	8
. Nature of business	or purposes to be conducted of	or promoted in Florida: PRople	<u> </u>
Mana	ement	1	/
- Manag		-//	
	X. Bene	./L	APR CREET
		authorized representative of a member.	R = =
		F.S., the execution of this document constitutes erjury that the facts stated herein are true.)	R 29 PI
	<u> </u>	LOICT	
<u>.</u>	Typed or printe	ed name of signee	imion _ C
	Types of prime		

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.

^	ilable, the alternate name to be used in the state of Florida is:
2. The name a	nd the Florida street address of the registered agent and office are:
	RhonA BeNLDICT (Name)
	18911 Collins Ave # 707 Florida Street Address (P.O. Box NOT ACCEPTABLE)
	Lunny Islas BoackFL 33/60 City/State/Zip
Havino been n	amed as registered agent and to accept service of process for the above stated limited

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)

1. The name of the Limited Liability Company is:

Violer Probeeties In LLC

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

WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

Members of Name of Limited Liability Company)
(Name of Limited Liability Company)
a limited liability company duly organized and existing under the laws of
State of Montann (State of Country of Organization)
Because the name of this foreign limited liability company does not satisfy the
requirements of the s. 608.406, F.S., the limited liability company hereby adopts the
following name to transact business in the state of Florida:
(Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability Company, L.L.C., or LLC.)
Date: 4/26/08
Signature(s) of Manager(s) and or Managing Member(s):
Sell Rhown BeneDICT

WAPR 29 PM 1: 4

CR2E122 (7/07)

From: "Garrity, Avignone & Banick" <gabwlaw@qwest.net>

Subject: Re: Certificate of good standing Date: April 23, 2008 1:37:13 PM EDT

To: Rhona Benedict <rhonabenedict@mac.com>

Rhona:

Attached is a copy of the Certificate of Existence for Violet Properties, LLC. We obtain them on line from the Montana Secretary of State and do not get and "original" copy. There is a certified file number on the bottom right hand corner of the Certificate.

Let me know if you have any trouble opening this document.

PLEASE NOTE THAT, EFFECTIVE IMMEDIATELY, OUR EMAIL ADDRESSES WILL CHANGE AS FOLLOWS:

michaelggarrity@qwest.net will change to michaelggarrity@qwestoffice.net gabwlaw@qwest.net will change to gabwlaw@qwestoffice.net

Email will be forwarded until December 31, 2008, but please change your records as soon as possible to avoid delay in delivery of email messages or undeliverable mail.

Michael G. Garrity, Attorney at Law GARRITY, AVIGNONE & BANICK 504 West Main Street Bozeman, Montana 59715 Telephone: (406) 582-8822 Fax: (406) 582-0022

The information contained in this e-mail message is being transmitted to and is intended only for the use of the individual named above. If the reader of this message is not the intended recipient, you are hereby advised that any dissemination, distribution or copying of this message is strictly prohibited. If you have received this message in error, please notify us immediately by

telephone at (406) 582-8822 and destroy this message.

Rhona Benedict wrote:

Hello Mike,

Hoping all is well

I am trying to open a bank acct for Violet Properties and the Bank has asked me to register the Co. in Fl. I have done that and the state wants an original certificate of good standing not older than 60 days. Could you get that for me from the State and Fed Ex it to me. Please let me know.

Thanks Rhona

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CERTIFICATE OF EXISTENCE

I, Brad Johnson, Secretary of State of the State of Montana, do hereby certify that

VIOLET PROPERTIES, LLC

duty filed its Articles of Organization in this office on 16 September 2005, and on that date was created a limited liability company.

SECRETARY OF STATE TALLAHASSEE. FLORIDA

I further certify that all fees reflected in the records of the Secretary of State have been paid by said limited liability company and that the most recent annual report has been filled with this office.

I further certify that no articles of dissolution have been placed on record in this office by said limited liability company and my records indicate the limited liability company is in good standing under the laws of the State of Montana and authorized to transact in business and conduct its affairs in this state.

The Secretary of State cannot certify that tax and penalties owed to this state on record with the Department of Revenue are current. Please contact the Department of Revenue at (406) 444-6900 to obtain information on tax status.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of Montana, at Helena, the Capital, this 23 April 2008.

2

BRAD JOHNSON Secretary of State

Certified File Number: C148129

2008 APR 29 PM 1: 45