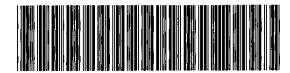
M0800002604

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



700122286007

04/07/08--01026--015 **125.00

OR JUN -3 PH 12: 1

T. HAMPTON

JUN - 4 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: JEFF RISINGER WALLCOVERING 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:
JEFF RISINGER
(Name of Person)
JEFF RISINGER WALLCOVERING LLC
(Firm/Company)
806 24TH AVE EAST
(Address)
NEW SMYRNA BEACH, FL 32169
(City/State and Zip Code)
For further information concerning this matter, please call:
Name of Person) at (38C) 846-6659 (Area Code & Daytime Telephone Number)
MAILING ADDRESS: STREET ADDRESS:
Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: [Inclosed is a check for the fo

SO FINE

THE NET DATE INCHES



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

08 JUN - 3 PM 4: 01

SECRETARY OF STATE TALLAHASSEE, FLORIDA

May 27, 2008

JEFF RISINGER 806 24TH AVE EAST NEW SMYRNA BEACH, FL 32169

SUBJECT: JEFF RISINGER WALLCOVERING LLC

Ref. Number: W08000023882

We have received your document for JEFF RISINGER WALLCOVERING LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

You failed to make the correction(s) requested in our previous letter.

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the corrected original and one copy of 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) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 308A00033149

08 MAY 27 PM 4: 07

SECRETARY OF STATE TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE Division of Corporations

May 13, 2008

JEFF RISINGER 806 24TH AVE EAST NEW SMYRNA BEACH, FL 32169

SUBJECT: JEFF RISINGER WALLCOVERING LLC

Ref. Number: W08000023882

We have received your document for JEFF RISINGER WALLCOVERING LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

According to section 607.0202(1)(b) or 617.0202(1)(b), Florida Statutes, you must list the corporation's principal office, and if different, a mailing address in the document. If the principal address and the registered office address are the same, please indicate so in your document.

Please list the complete principal's office address.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

The registered agent must sign accepting the designation.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the corrected original and one copy of 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) 245-6855.

Tammy Hampton Regulatory Specialist II Registration/Qualification Section

Letter Number: 608A00030462

18 1 1 V

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.	JEFF RISINGER WALLCOVERING LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or			
	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or	"LLC.	")	_
CC	If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach onsent of the managers or managing members adopting the alternate name. The alternate name must include "I company," "L.L.C.," "LLC.")	a copy Limited	of the Liabi	written lity
2.	DELAWARE 3, 26-2208891			
	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)			_
4,	(Date of Organization) (Date of Organization) (Duration: Year Imited liability company exist or "perpetual")	will ce	ase to	
6.	(Date first transacted business in Florida if prior to cariffration)			-
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)			
(7.	. Seft Bisinger FOG 24th Ave New SmyR	NA		•
	Jeff Bisinger 806 24th Ave New Smyr Jeff Bisinger 806 24th Ave New Smyr J Beach F/4, 32469 (Street Address of Principal Office)			
	(Street Address of Principal Office)	,		•
8.	. If limited liability company is a manager-managed company, check here			
٩	. The name and usual business addresses of the managing members or managers are as follo	ws.		
٠.			2246	20
	JEFF RISINGER - 806 24TH AVE EAST - NEW SMYRNA BEACH, I		3210	- -
				-
				-
	0. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having			cords in
	ne jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign anslation of the certificate under oath of the translator must be submitted.)	ı ıarıgua	ige, a	
	•	ERIN	IG	
1	1. Nature of business or purposes to be conducted or promoted in Florida: WALLCOVE	- C	8	-
	INSTALLATION			· <u></u>
	1 Seht Kismy		芝	=
	Signature of a member or an authorized representative of a member.		ω -	m
		<u> </u>		O
	JEFF RISINGER	RISA TATE	<u>-</u> ₩	
	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:
JEFF RISINGER WALLCOVERING 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:
JEFF RISINGER
(Name)
806 24TH AVE EAST
Florida Street Address (P.O. Box NOT ACCEPTABLE)
NE SMYRNA BEACH 32169 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.

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

∾

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "JEFF RISINGER WALLCOVERING LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTIETH DAY OF MAY, A.D. 2008.

AND I DO BEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "JEFF RISINGER WALLCOVERING LLC" WAS FORMED ON THE NINETEENTH DAY OF MARCH,
A.D. 2008.

4521025 8300

080637040

You may verify this certificate coline at corp.delaware.gov/authver.abtml Daniel Smile Hindron

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6625064

DATE: 05-30-08