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SECRETARY OF STAT
TALLAHASSEE, FLORI

T. CLINE

JUN 1 1 2008

EXAMINER

COVER LETTER

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

TO:

Registration Section
Division of Corporations

liability company to transact business in Florida...

Please return all correspondence concerning this matter to the following:

8265 CASSIA	Terrace		
	(Address)	_	
TAMAINC	F133321	_	
(City	/State and Zip Code)		
For further information concerning this matter,	please call:		
Kelsin Joseph (Name of Person)	at (954) 275 7457 (Area Code & Daytime Telephone Nu	1ALEAHASSE	•
MAILING ADDRESS:	STREET ADDRESS:		Markings Spirite on
Division of Corporations	Division of Corporations		ing .
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	PHIZ: 3	
Enclosed is a check for the following amount:			
☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee Certificate		ee, Certificate s & Certified Co	ру

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

IN COMPLIANCE WITH SECTION 608:303, 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; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(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.") 2. STATE OF WYOMING (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. 4-5-2006 (Date of Organization) 5. Corporation: Year limited liability company will cease to exist or "perpetual")
6. (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 8265 CASSIA TERRACE
TAMARAC F1 33321
(Street Address of Principal Office)
 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:
8265 CASSIN TERACE
TAMAML F1 33301 ASS &
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:
Sales (1)
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. The name of the Limited Liability Company is:	
INTERNET Couler, LIC	
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:	
Ketsia Joseph	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	
TAMMRAC FL 3333-1 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.	
HASSEE TO SEE THAT THE THAT IS THE THE THAT IS THE THAT IS THE THAT IS THE THAT IS THE THA	E
\$ 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 WYOMING Office of the Secretary of State

I, MAX MAXFIELD, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

Internet Cooler, LLC is a Limited Liability Company

formed or qualified under the laws of Wyoming did on **April 5**, **2006**, comply with all applicable requirements of this office. Its period of duration expires 04/05/2036. This entity has been assigned entity identification number **2006-000511076**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 1st day of May, 2008 at 11:51 AM. This certificate is assigned 002800716.



May Malfield Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.