| (Requestor's Name) | | | |
|---|--|--|--|
| (Address) | | | |
| • (Address) | | | |
| (City/State/Zip/Phone #) | | | |
| PICK-UP WAIT MAIL | | | |
| (Business Entity Name) | | | |
| | | | |
| (Document Number) | | | |
| Certified Copies Certificates of Status | | | |
| Special Instructions to Filing Officer | | | |
| ANCUNTS | | | |
| MAY 28 2009 | | | |
| EXAMINER | | | |

Office Use Only



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May 8, 2009

ROBERTA BONFIGLIO 15963 NW 14TH CT. PEMBROKE PINES, FL 33028

SUBJECT: STAND STONG GROUP, LLC

Ref. Number: W09000021785

We have received your document for STAND STONG GROUP, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

The document must contain the name, title, and business address of each managing member or manager.

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) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 909A00015716

COVER LETTER

| _ | tration Section on of Corporations | |
|----------------|---|--|
| SUBJECT: | STAND STRONG GROU | |
| | (Name of L | imited Liability Company) |
| Florida," Cert | | Liability Company for Authorization to Transact Business in e submitted to register the above referenced foreign limited a |
| Please return | all correspondence concerning thi | s matter to the following: |
| | Rob | erta Bonfiglio |
| | (| Name of Person) |
| | STAND | STRONG GROUP, LLC |
| | (| (Firm/Company) |
| | 15 | 963 NW 14 CT (Address) |
| | | (Address) |
| | PEMBROKE | PinoFL 33028 |
| | (City | /State and Zip Code) |
| For further in | formation concerning this matter, | please call: |
| Robe | erta Bonfiglio | at (954) 483-3557 |
| | (Name of Person) | at (<u>954</u>) <u>483-3557</u> (Area Code & Daytime Telephone Number) |
| MAII | LING ADDRESS: | STREET ADDRESS: |
| | on of Corporations | Division of Corporations |
| | Box 6327 | Clifton Building |
| Tallah | nassee, FL 32314 | 2661 Executive Center Circle Tallahassee, FL 32301 |
| | check for the following amount: 5.00 Filing Fee \$130.00 Filing Fee Certificate | & \$\infty\$\$\\$155.00 Filing Fee & \$\Boxed{\square}\$\$\$160.00 Filing Fee, Certificate e of Status & 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:

| 1. STAND STRONG GROUP, 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 vocusent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liabili Company," "L.L.C" "LLC.") | |
| 2. Nevada (Jurisdiction under the law of which foreign limited liability company is organized) 3. 26-4682252 (FEI number, if applicable) | |
| 4. 03-25-09 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to | |
| exist or "perpetual") 6. NA | |
| (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) | AMELIES. |
| 7. 15963 NW 14 CT Pembroke Pines FC 33028 FG FG (Street Address of Principal Office) | T |
| 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: | |
| 15963 NW 14 CT Pembroke, PINES FL 33028 | |
| ROBERTA Bonfiglio - MANAGER | |
| 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of receithe 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.) | nds in |
| 11. Nature of business or purposes to be conducted or promoted in Florida: | |
| Vending Business | |
| 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.) | |

Roberta Bonfiglio

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: | | |
|---|----------------------|--|
| STAND STRONG GROUP, LLC | <u></u> | . |
| 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: LAW OFFICE OF RUDOLPH M. D., LASCIOJR., P. A. (Name) 5798 JOHNSON ST Florida Street Address (P.O. Box NOT ACCEPTABLE) HOLLYWOOD FL 33021 City/State/Zip | 2009 HAY 27 PM 2: 17 | ordered services of the servic |

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)

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, STAND STRONG GROUP, LLC, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since March 25, 2009, and is in good standing in this state.



Certified By: Stacey Roter
Certificate Number: C20090325-2646
You may verify this certificate
online at http://www.nvsos.gov/

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on March 26, 2009.

ROSS MILLER Secretary of State