# M0900003054

(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:
WO9-35947
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A. LUNT
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AUG 10 2009

Office Use Only



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PILED
2009 AUG -7 AM 10: 38
SECRETARY OF STATE.

Shane Collett 11231 Summer Star Drive Riverview, FL 33579 (812) 360-0258 sacollet@hotmail.com

### Dear Sir/Madam:

I have previously filed the paper work for to register a foreign LLC in Florida but believe that I submitted the wrong paperwork or amount of money. I am re-submitting the paperwork today. IF for some reason the original paperwork was correct please disregard this. Thank you for patience, I appreciate your time and will try to not make these types of mistakes in the future.

Shane Collett



### FLORIDA DEPARTMENT OF STATE Division of Corporations

August 7, 2009

SHANE COLLETT 11231 SUMMER STAR DR. RIVERVIEW, FL 33579

SUBJECT: HOOSIERS ON VACATION

Ref. Number: W09000035947

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

The name of a limited liability company must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The word "Limited" may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." Please amend your document accordingly.

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 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.

Letter Number: 709A00027115

Agnes Lunt Regulatory Specialist II

### COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Hoosiers on Vacation 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:
Shane Collett Name of Person
Housiers on Vacation Firm/Company
11375 Big Bend Rd Address
River Vizw, FL 33569  City/State and Zip Code
Sacolute hoten ail-con  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Share Collett at (812) 360-0258  Name of Person Area Code & Daytime Telephone Number
MAILING ADDRESS:  Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314  STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\$130.00 Filing Fee & \$\$155.00 Filing Fee & \$\$160.00 Filing Fee, Certificate 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 STATUT LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE	TES, THE FOLLOWING IS SUBMITTED TO REGISTER A FORE E STATE OF FLORIDA:	IGIV
1. Hoosiers on Vacation	lude "Limited Liability Company," "L.L.C.," or "LLC.")	
(Name of Foreign Limited Liability Company; must incl	lude "Limited Liability Company," "L.L.C.," or "LLC.")	
(If name unavailable, enter alternate name adopted for the purpo	pose of transacting business in Florida and attach a copy of the writ	ten
consent of the managers or managing members adopting the alter Company," "L.L.C," "LLC.")	ternate name. The alternate name must include "Limited Liability	
	3 27-0623000	
2. (Aurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)	
· · · · · · · · · · · · · · · · · · ·	5 Pronty 1	
4. 7-27-69 (Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")	
6. 8/13/09	exist or "perpetual")	
6. 8/13/09 (Date first transacted business in F. (See sections 608.501 & 608.502 F.S.)	Florida, if prior to registration.)	<u> </u>
7. 11375 Big Bood Rd	m~	77
Riverview, FL 33569	——————————————————————————————————————	カフ
(Street Address	ss of Principal Office)	
8. If limited liability company is a manager-manager		
9. The name and usual business addresses of the man		,
Shane Collett 1123	Summer Star Rd Riverview, FL 33	3/
	•	
10 And Ham is a 20 a contra		J
the jurisdiction under the law of which it is organized. (A photoco	O days old, duly authenticated by the official having custody of record opy is not acceptable. If the certificate is in a foreign language, a	<u>Su</u>
translation of the certificate under eath of the translator must be sul		
11. Nature of business or purposes to be conducted	or promoted in Florida: Kestaurant 1 Bar	•
Xh_ W.H	>	
Signature of a member or an a	authorized representative of a member.	
an affirmation under the penalties of pe	), F.S., the execution of this document constitutes enjury that the facts stated herein are true.)	•
Shane Collet	<del></del>	
Typed or printe	ted 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:		
Hoosiers on Vacation LLC		
If unavailable, the alternate to be used in the state of Florida is:	2009 AUG SECRET TALLAHA	<del>''</del> '
2. The name and the Florida street address of the registered agent and office are:	-7 ARY SSE	
Shane Collett	AM 10: 39 Of STATE E. FLORID!	O
Florida Street Address (P.O. Box NOT ACCEPTABLE)	<b>~</b>	
RIVEVEW FL 33579.		

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

Certified Copy (optional) \$ 30.00

5.00 Certificate of Status (optional)

## State of Indiana Office of the Secretary of State

### CERTIFICATE OF ORGANIZATION

of

#### HOOSIERS ON VACATION LLC

I, Todd Rokita, Secretary of State of Indiana, hereby certify that Articles of Organization of the above Domestic Limited Liability Company (LLC) have been presented to me at my office, accompanied by the fees prescribed by law and that the documentation presented confirms to law as prescribed by the provisions of the Indiana Business Flexibility Act.

NOW, THEREFORE, with this document I certify that said transaction will become effective Monday, July 27, 2009.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, July 28, 2009

TODD ROKITA.

SECRETARY OF STATE