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PICK-UP WAIT MAIL						
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Special Instructions to Filing Officer:						
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EXAMINER





#### FLORIDA DEPARTMENT OF STATE Division of Corporations

October 6, 2009

JOHN DUBINSKY 1402 BRICKELL BAY DRIVE 602 MIAMI, FL 33131

SUBJECT: ASSET TRANSFORMATIONS, LLC

Ref. Number: W09000044583

We have received your document for ASSET TRANSFORMATIONS, 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):

The registered agent must sign accepting the designation.

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) 245-6955.

Letter Number: 109A00032324

Suzanne Hawkes Regulatory Specialist II

Division of Comparations D.O. DOV 6997 Wellaharras Florida 99914

#### **COVER LETTER**

TO: Registration Section Division of Corporations							
SUBJECT: _ ASSET	TRANSFORMATIONS, LLC.						
The enclosed "Application by Foreign Limited Liabset Existence, and check are submitted to register the ab	lity Company for Authorization to Transact Business in Florida," Certificate of ove referenced foreign limited liability company to transact business in Florida						
Please return all correspondence concerning this man	tter to the following:						
••••	JOHN DUBINSKY						
ASSET	TDANSFORMATIONS LLC						
ASSET TRANSFORMATIONS, LLC.							
1402 BRICKELL BAY DRIVE #602							
MIAMI, FL 33131							
ASSETTRANSFORMATIONS@HOTMAIL.COM							
For further information concerning this matter, please call:							
MIRANDA KRUSE	at (305) 434-2456 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 amour	nt:						
\$125.00 Filing Fee \$130.00 Filing Certificate of							

### 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:

l. <u>.</u>	ASSET TRANSFORMATIONS, LLC. (Name of Foreign Limited Liability Company; must		e "Limited Liability Company," "L.L.C.," or "LLC.")	:
on			of transacting business in Florida and attach a copy of the wate name. The alternate name must include "Limited Liability	
,	STATE OF DELAWARE	2	N/A	
	Jurisdiction under the law of which foreign limited lial company is organized)	3. bility	(FEI number, 11 applicable)	
1	JULY 2009	5,	PERPETUAL	
r.	(Date of Organization)	5.	(Duration: Year limited liability company will cease to exist or "perpetual")	
	. M	WELL IIAMI, ddress of	BAY DRIVE #602 FL 33131 Principal Office)  ompany, check here	FILED
			JBINSKY	

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 eath of the translator must be submitted.)

MIAMI, FL 33131

11. Nature of business or purposes to be conducted or promoted in Florida:

MANAGE RETAIL WEB PAGE AND A DESIGN COMPANY

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.)

MIRANDA KRUSE

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:

#### ASSET TRANSFORMATIONS, LLC.

If unavailable, the alternate to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:



#### JOHN DUBINSKY

Florida Street Address (P.O. Box NOT ACCEPTABLE)

#### 1402 BRICKELL BAY DRIVE #602 MIAMI, FL 33131

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)

## Delaware

PAGE 1

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "ASSET TRANSFORMATIONS 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 TWENTY-THIRD DAY OF SEPTEMBER, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.



4455031 8300

090879343

AUTHENTICATION: 7544109

DATE: 09-23-09

You may verify this certificate online at corp.delaware.gov/authver.shtml