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FILED 2009 OCT 20 PM 1: 17 SECRETARY OF STATE SECRETARY OF STATE

C. LEWIS

OCT 2 1 2009

EXAMINER

COVER LETTER

	gistration Section vision of Corporations			
SUBJECT:		MG Enterprises LLC		
	1	Name of Limited Liability Company		
			Transact Business in Florida," Certificate of ility company to transact business in Florida.	
Please return	n all correspondence concerning this	matter to the following:		
		Terry Wells		
	Name of Person			
TCMG Enterprises LLC				
	Firm/Company			
	P.O. Box 6957			
Address				
Lake Tahoe, NV, 89449				
	City/State and Zip Code			
	mail@nevada123.com E-mail address: (to be used for future annual report notification)			
n 6 4 1		•	ouncation)	
For further i	nformation concerning this matter, p	lease call:		
	Terry Wells	at (800)	553-0615	
	Name of Person	Area Code & Daytime Telepho	one Number	
	AILING ADDRESS:	STREET ADDRESS: Division of Corporations		
Reg	gistration Section	Registration Section		
	D. Box 6327 lahassee, FL 32314	Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		
Enclosed i	s a check for the following am	ount:		
	\$125.00 Filing Fee \$130.00 Fi	ling Fee & \$155.00 Filing Fee & 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: TCMG Enterprises 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.") (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) October 8, 2009 Perpetual (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") **Upon Qualification** (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 297 Kingsbury Grade, Suite 100, Box 4470, Lake Tahoe, NV 89449 (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: SILVER STATE MANAGEMENT SERVICES LLC 297 Kingsbury Grade, Suite 150, Box 6957 Lake Tahoe, NV, 89449 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.) Management 11. Nature of business or purposes to be conducted or promoted in Florida: SILVER STATE MANAGEMENT SERVICES LLC., Manager Terry Wells, its Vice President

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:	
TCMG Enterprises 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:	
Capitol Corporate Services, Inc. (Name)	FIL 20 200 OCT 20 TALLAHAS
155 Office Plaza Drive, Suite A Florida Street Address (P.O. Box NOT ACCEPTABLE)	O PR TO
Tallahassee, FL 32301 City/State/Zip	ORIDA ORIDA

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.

Ooyle Windle, Assistant Secretary (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, TCMG ENTERPRISES 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 October 8, 2009, and is in good standing in this state.

Electronic Certificate

You may verify this electronic certificate online at http://www.nvsos.gov/

Certificate Number: C20091016-1215

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on October 16, 2009.

ROSS MILLER Secretary of State