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SECRETARY OF STATE

T. HAMPTON

May 2 0 2009

EXAMINER

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#### **COVER LETTER**

**TO:** Registration Section Division of Corporations

SUBJECT: Intercontinental Enterprises, LLC (Name of Limited Liability Company)	
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact B Florida," Certificate of Existence, and check are submitted to register the above referenced foreign liability company to transact business in Florida	
Please return all correspondence concerning this matter to the following:	
Zarif Hakimov (Name of Person)	
Intercontinental Enterprises, LLC	
2117 Skyglen Trace (Address)	
(Address)	
Cane Ridge TN 370/3 (City/State and Zip Code)	
For further information concerning this matter, please call:	
Zarif Hakimov at (330) 701-0792  (Name of Person) (Area Code & Daytime Telephone Number	•)
MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a check for the following amount:  [Status] \$125.00 Filing Fee \$\text{Status}\$ \$130.00 Filing Fee & Status \$\text{Status}\$ \$Certified Copy of Status & Certified Copy} \$\text{Status}\$ \$Stat	



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

09 NOV 19 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

February 10, 2009

ZARIF HAKIMOO 2117 SKYGLEN TRACE CANE RIDGE, TN 37013

SUBJECT: INTERCONTINENTAL ENTERPRISES, LLC

Ref. Number: W09000006424

We have received your document for INTERCONTINENTAL ENTERPRISES, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

The registered agent must sign accepting the designation.

Please return the corrected original and one copy of 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) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 409A00004702

## 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. Intercontinental Enfergy; sey LLC (Name of Foreign Limited Liability Company) must include "Limited Liability Company," "L.L.C.," or "I	
Interconsinental Building Solutions, LLC (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a consent of the managers or managing members adopting the alternate name. The alternate name must include "Li Company," "L.L.C," "LLC.")	
2. State of OH10, US (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)	
company is organized)	
4. O1. 21, 2005 (Date of Organization)  5. Perpetual (Duration: Year limited liability company wexist or "perpetual")	ill cease to
6. 11.10.09. (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7. 2117 Skyglen Trace, Cane Ridge, TN 3701	3
(Street Address of Principal Office)	<del></del>
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 follow	vs:
Zarif Hakimov	
2117 Skyolin Trace.	
Zarif Hakimov  2117 Skyplin Trace  Cane Ridge, M 37013	
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having of the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign latranslation of the certificate under oath of the translator must be submitted.)	ustody of records in
11. Nature of business or purposes to be conducted or promoted in Florida:	
Any and All Lawful Business Murfer	SECT IVISIO
	CRETARY ION OF C
Signature of a member of 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.)	RY OF CORP
ZARIF HAKIMOU  Typed or printed name of signee	PORA
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:
Intercontinental Enterprises, LLC
If unavailable, the alternate to be used in the state of Florida is:
Intercontinental Building Solutions, LLC
2. The name and the Florida street address of the registered agent and office are:
Zarif Hakimov (Name)
(Name)
110 N. Lopona Rd Suite 13 Florida Street Address (P.O. Box NOT ACCEPTABLE)
Tallahussee FL 32308 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.

\$ 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
JIVISION OF CORPORATIONS
AND 19 AM 8:57

# United States of America State of Ohio Office of the Secretary of State

I, Jennifer Brunner, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show INTERCONTINENTAL ENTERPRISES, LLC., an Ohio Limited Liability Company, Registration Number 1513808, was organized within the State of Ohio on January 21, 2005, is currently in FULL FORCE AND EFFECT upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 12th day of November, A.D. 2009

Ohio Secretary of State

Validation Number: V2009316N9131A