# 

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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,
W09000042860

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10 JAN 20 AM 8: 59

SECRETARY OF STATE
FALLAHASSEE, FLORIDA

D. BRUCE

JAN 21 2010

**EXAMINER** 

#### COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Magic One 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:
Mike Windr Name of Person
Magic One Lie
POBOK 410551 FOR Address
Charlette UC 2824 ST. S. S. City/State and Zip Code
E-mail address: (to be used for fugure annual report notification)
For further information concerning this matter, please call:
Mke Mnor at (784) 504-5222  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 \$\ \text{S130.00 Filing Fee & Certificate} \text{Certificate of Status} \text{S155.00 Filing Fee & S160.00 Filing Fee, Certificate} \text{Of Status & Certified Copy}



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

September 24, 2009

MIKE MINOR PO BOX 410551 CHARLOTTE, NC 28241

SUBJECT: MAGIC ONE LLC Ref. Number: W09000042860

10 JAN 20 AM 8: 59
SECRETARY OF STATE
TALLAHASSEF, FI ORIDA

We have received your document for MAGIC ONE 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 document must contain the name, title, and business address of each managing member or manager who will manage the foreign limited liability company in the state of Florida. Please insert "MGRM" in the title portion for each managing member and "MGR" in the title portion for each manager.

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) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 609A00031267

## 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:

Magic Doe LLC	
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC."	) <b>5</b>
f name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach acropy onsent of the managers or managing members adopting the alternate name. The alternate name must include "Limited company," "L.L.C," "LLC.")	othe writen
Worth Carolino (Jurisdiction under the law of which foreign limited liability)  (Jurisdiction under the law of which foreign limited liability)  (FEI number if applicable)	
4/18/05	25
(Date of Organization)  (Duration: Year limited liability company will cea exist or "perpetual")	ise to
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	<del></del>
Charlotte NC28241/ Charlotte NC:	<u>e B</u> lodi,
(Street Address of Principal Office)	<u>282</u> 73
If limited liability company is a manager-managed company, check here	
The name and usual business addresses of the managing members or managers are as follows:  Mike Minor Po Box 410551	
Charlotto NC 28241	
Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody a jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language instation of the certificate under oath of the translator must be submitted.)	
. Nature of business or purposes to be conducted or promoted in Florida: Huto Clean!	NG
	<del></del> ·
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.)	
MA. L. MA.	

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:			
- Magic One 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:	FECK	10 J	
Frank Miranda (Name)	ETARY O HASSEE.	JAN 20 A	
1411 5th St.	F STATE.	H 8: 59	D
Florida Street Address (P.O. Box NOT ACCEPTABLE)			
Orange City FL 32763 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 obligation 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)



## NORTH CAROLINA Department of The Secretary of State

## CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

#### MAGIC ONE, LLC

is a limited liability company duly formed under the laws of the State of North Carolina, having been formed on the 18th day of April, 2005, with its period of duration being Perpetual.

I FURTHER certify that the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act; and that the said limited liability company has not filed articles of dissolution as of this date of this certificate.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 20th day of January, 2010.

Elaire I. Marshall

Secretary of State