

	•	
	(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:

L. SELLERS

SEP 17 2010

EXAMINER

Office Use Only



600185335336

09/15/10--01005--020 **155.00

10 SEP 15 PM 3: 41
SECRETARY OF STATE

COVER LETTER

TO:

TO:	Registration Section Division of Corporations	;	
SUBJI	ЕСТ:	Cheyenne Solutions, LLC	
		Name of Limited Liability Company	
		reign Limited Liability Company for Authorization to Transact Business in Florida, and to register the above referenced foreign limited liability company to transact business.	
Please	return all correspondence co	concerning this matter to the following:	
		Evelyn A. Damsma	
		Name of Person	
		Cheyenne Solutions, LLC	
		Firm/Company	
		110 Slumber Meadow Trail	
		Address	
		Palm Coast, FL 32164	
		City/State and Zip Code	
		mygreymariah@att.net	
		E-mail address: (to be used for future annual report notification)	
For fur	rther information concerning	g this matter, please call:	
		A. Damsma at (386) 313-2643	
	Name o	of Person Area Code & Daytime Telephone Number	
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		
Enclo	osed is a check for the fo	following amount:	
	\$125.00 Filing Fee	S130.00 Filing Fee & S155.00 Filing Fee & S160.00 Filing Fee, C Certificate of Status & Certified Copy of Status & Certified Copy	

7-10-10

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: Cheyenne Solutions, 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.") 27-2901229 Delaware 2. (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) Perpetual 6/28/2010 (Duration: Year limited liability company will cease to (Date of Organization) exist or "perpetual") 7-16-2010 (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 7. 110 Slumber Meadow Trail Palm Coast, FL 32164 (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: Evelyn A. Damsma 110 Slumber Meadow Trail Palm Coast, FL 32164 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.) 11. Nature of business or purposes to be conducted or promoted in Florida: E-commerce / Retail / Internet Sales 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.) 4 paper word in ala land smart to exclude ck

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:	
Cheyenne Solutions, 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:	
Evelyn A Damsma (Name)	
110 Slumber Meadow Trail Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Palm Coast_FL 32164 City/State/Zip	
(Name) 110 Slumber Meadow Trail Florida Street Address (P.O. Box NOT ACCEPTABLE) Palm Coast FL 32164	

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.

Quelyn a Damona
(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

10 SEP IS PM 3: 41

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "CHEYENNE SOLUTIONS, 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 TWENTIETH DAY OF AUGUST, A.D. 2010.

4841524 8300

100836100

Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 8184468

DATE: 08-20-10

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