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SEGRETARY OF STATE

Tr.
COVER LETTER
TO: Registration Section Division of Corporations
SUBJECT: KHS VENTURES 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:
KARL H. SEHNEIDER
Name of Person
Firm/Company
14511 WISHING WIND WAY Address
Address
CLERMONT FL 34711-6209
City/State and Zip Code
CLERMONT FL 34711-6209 City/State and Zip Code // UVS mok in QCfl. rr. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person Area Code & Daytime Telephone Number
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 \$130.00 Filing Fee & \$155.00 Filing Fee & Certificate of Status Certified Copy of Status & Certified Copy



September 14, 2010

KARL H. SCHNEIDER 14511 WISHING WIND WAY CLERMONT, FL 34711-6209

SUBJECT: KSH VENTURES LLC Ref. Number: W10000043222

We have received your document for KSH VENTURES 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 designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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) 245-6967.

Leslie Sellers Regulatory Specialist II

Letter Number: 910A00021874

. APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	SECTION 608.503, FLORIDA S PANYTO TRANSACT BUSINESS			SUBMITTED TO	REGISTER 2	A FOREIGN
1. (Name of Foreign	CHS VENTURES Limited Liability Company; m	LLC ust include "Lir	nited Liability Com	many.""L.L.C"	or "LLC.")	
(Nume of Foreign	Diffice Diability Company, in	ust morace En	inio Diability Con	,pany, 2.2.0.,	0. 220. ,	
	er alternate name adopted for the or managing members adopting C.")					
2 W/Y01	nin G	3	27-2593	3989		
(Jurisdiction under the company is organized)	かんら law of which foreign limited lia					
4(Date of	Organization)	5. (D)	uration: Year limite ist or "perpetual")	PERPETU d liability compa	AL my will cease	to
6	VO TRANSACTIONS (Date first transacted busine (See sections 608.501 & 608.	ss in Florida, if 502 F.S. to dete	prior to registration	1.) lity)		
7	•			•		
	2 LERMONT, FL (Street A	34711	- 6209			
	(Street A	Address of Prince	cipal Office)			
8. If limited liability	company is a manager-ma	naged comp	any, check here			
9. The name and usu	al business addresses of th	e managing	members or man	agers are as fo	ollows:	
KARL H	. SCHNEIDER	14511 W	ISHING WIND	WAY Co	ERMONT !	-C 34711-620
		<u> </u>	<u> </u>			
	certificate of existence, no more t					
D	w of which it is organized. (A pl under oath of the translator must		acceptable. If the cer	tificate is in a for	eign language	, a
11. Nature of busines	s or purposes to be condu	cted or prom	oted in Florida:	INTERNET	SARCES	<u> </u>
of HouseHou	D 600D5				₹s -	·•
	Harl N	Sale	reide) SEF	
	Signature of a member of (In accordance with section 608.4				TARN	CONTRACTOR OF THE PARTY OF THE
	an affirmation under the penaltie	s of perjury that	he facts stated herein	are true.)	MA R	TT
	Typed or p	orinted name	of signee	<u>ER</u>	FLORI	

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:
KHS VENTURES 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:
KARL H. SOHNEIDGE
(Name)
14511 WISHING WIND WAY
Florida Street Address (P.O. Box NOT ACCEPTABLE)
CIERMONT FL 34711-6209 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)

State of Wyoming

Office of the Secretary of State



United States of America, State of Wyoming

ss.

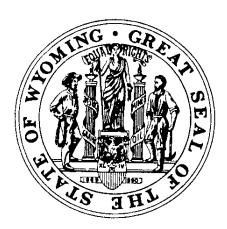
I, MAX MAXFIELD, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

KHS Ventures, LLC is a Limited Liability Company

formed or qualified under the laws of Wyoming did on **July 21, 2010**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2010-000587569**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 25th day of August, 2010 at 2:05 PM.



Max Massille Secretary of State

By Rosalie Conzales