M10000004349

(Requestor's Name)							
(Address)							
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(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
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Certified Copies Certificates of Status							
Considerations to Siling Officer							
Special Instructions to Filing Officer:							
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SECRETARY OF STATE
TALLAHASSEE, FIRBIN

D. BRUCE

OCT 4 2010

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 8, 2010

TIMOTHY TAYLOR P.O. BOX 49 NOCATEE, FL 34268

SUBJECT: ORCHID FANATIC L.L.C.

Ref. Number: W10000042235

We have received your document for ORCHID FANATIC L.L.C. and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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: 110A00021355

COVER LETTER

TO:	Registration Section Division of Corporation	ıs							
SUBJ	ECT:	Orchid	Fanatic L.L.C.						
		Name of	Limited Liability Company						
The en	aclosed "Application by Fonce, and check are submitted	oreign Limited Liability and to register the above	Company for Authorization to referenced foreign limited liabi	Transact Business in ility company to trans	Florida," Certificate of sact business in Florida				
Please	return all correspondence	concerning this matter t	o the following:						
			Timothy Taylor						
			Name of Person						
		Or	Orchid Fanatic.com						
			Firm/Company						
		P.O. Box 49							
		Address							
		Nocatee, FL 34268							
		Ci	ty/State and Zip Code						
TTFour@aol.com E-mail address: (to be used for future annual report notification)									
For fu	ther information concerni		-	onneadon					
	Timo	thy Taylor	at (847)	708-9022	A.				
	Name	of Person	Area Code & Daytime Telepho	one Number	10 0				
	MAILING ADDRESS Division of Corporation Registration Section P.O. Box 6327 Tallahassee, FL 32314	s Di ^s Re Cli	REET ADDRESS: vision of Corporations gistration Section fton Building 51 Executive Center Circle		FILE OCT -1 PM AHASSEE, FL	ewith (
Engl-	•	Tai	llahassee, FL 32301		PM 4: 08 OF STATE FLORIDA				
Encio	sed is a check for the	_	_						
	\$125.00 Filing Fee	\$130.00 Filing Fee Certificate of Sta			g Fee, Certificate & 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:

_,	Orchi	d Fana	itic L.L.C.		
(Name of Fore	eign Limited Liability Company; m	ust include	"Limited Liability Company,	," "L.L.C.," or "LLC	2.")
			com L.L.C.		
	enter alternate name adopted for the ers or managing members adopting "LLC.")				
	State of Wyoming	3.	27-239	96524	
(Jurisdiction under company is organized	the law of which foreign limited li- zed)	ability	(FEI number, i	f applicable)	
4	04/12/2010	5.	Perp (Duration: Year limited liab	etual	
(Da	te of Organization)		(Duration: Year limited liab exist or "perpetual")	oility company will o	ease to
6. October 1st, 2					
	(Date first transacted busine (See sections 608.501 & 608.	ss in Flori 502 F.S. to	da, if prior to registration.) o determine penalty liability)		
7. P .O. Box 4 9	25411 Palisade Rd.			· · · · · · · · · · · · · · · · · · ·	
Nocatee, FL					
	(Street A	Address of	Principal Office)	7:	,
8. If limited liabil	lity company is a manager-ma	anaged co	ompany, check here	LLA	10 Oc
9. The name and	usual business addresses of th	ne manag	ing members or manager	rs are as follows:	7 -
Timothy Tay				E. C.	7
25411 Palisa	ade Rd			LOR	1 D
Punta Gorda	ı, FL 33983			DA DA	8
the jurisdiction under	ginal certificate of existence, no more the law of which it is organized. (A p ficate under oath of the translator mus	hotocopy i	s not acceptable. If the certificat	.—	•
11. Nature of bus	iness or purposes to be condu	icted or p	promoted in Florida:	Internet Sale	S
)			
		let	W		
	(In accordance with section 608.	408(3)\F.S.	orized representative of a , the execution of this document of that the facts stated herein are tr	constitutes	
			y Taylor		
	Typed or	printed r	ame 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.

Certified Copy (optional)

Certificate of Status (optional)

\$ 30.00

\$ 5.00

STATE OF WYOMING Office of the Secretary of State

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

Orchid Fanatic L.L.C.

is a Limited Liability Company

formed or qualified under the laws of Wyoming did on **April 12, 2010**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2010-000583011**.

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 12:41 PM. This certificate is assigned 008200214.



Max Massiele Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.