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K. SALY EXAMINER NOV 1 9 2010



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

November 16, 2010

COX & SANCHEZ ATTN: THOMAS F COX P.O. BOX 40008 ST. PETERSBURG, FL 33743

SUBJECT: BLOCK SOLID FINANCIAL LLC

Ref. Number: W10000053736

We have received your document for BLOCK SOLID FINANCIAL 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 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.

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) 245-6870.

Karen A Saly Regulatory Specialist II

Letter Number: 310A00026890

#### **COVER LETTER**

SUBJECT: BLOCK SOLID FINANCIAL LLC  Name of Limited Liability Company	
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate 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:	
THOMAS F. COX	
Name of Person	
COX & SANCHEZ	
Firm/Company	
PO BOX 40008	
Address	
ST. PETERSBURG, FLORIDA 33743	•
City/State and Zip Code	
Maria@Coxsanchez.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
THOMAS F. COX, ESQUIRE at (727 ) 896-2691	
Name of Person Area Code & Daytime Telephone Number	
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314  MAILING ADDRESS: Division of Corporations Registration Section Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a check for the following amount:  \$\sum_{125.00}\$ \text{Filing Fee} \tag{\text{S130.00 Filing Fee & Gertificate of Stepty}} \tag{\text{Gertified Copy}}	

<sup>\*\*\*</sup>Once the Application has been filed, please forward a copy to my office, in the enclosed self-addressed stamped envelope.

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. BLOCK SOLID FINANCIAL 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 writte consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")
2. WYOMING  (Jurisdiction under the law of which foreign limited liability company is organized)  3. 27-3899434  (FEI number, if applicable)
4. November 4, 2010  (Date of Organization)  5. Perpetual  (Duration: Year limited liability company will cease to exist or "perpetual")
6. (Date first transacted business in Florida, if prior to registration.)
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 220 - 98th Avenue Northeast, St. Petersburg, Florida 33702
7. 220 - 98th Avenue Northeast, St. Petersburg, Florida 33702  (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:
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:
220 - 98th Avenue Northeast, St. Petersburg, Florida 33702
Mitchell E. Pozin
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: 1-10/ding CO.
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Signature of a member or an authorized representative of a member.
(In accordance with section 609 409/3) C.C. the execution of this decument paper interest on efficient and the

(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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Mitchell E. Pozin

## 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:
Block Solid Financial 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:
THOMAS F. COX
(Name)
4488 Star Street North
Florida Street Address (P.O. Box NOT ACCEPTABLE)
St. Petersburg FL 33709
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.  (Signature)

Filing Fee for Application

**Certified Copy (optional)** 

**Designation of Registered Agent** 

Certificate of Status (optional)

\$ 100.00

\$ 25.00

\$ 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,

#### **BLOCK SOLID FINANCIAL LLC**

## is a Limited Liability Company

formed or qualified under the laws of Wyoming did on **November 4, 2010**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2010-000592213**.

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 19th day of November, 2010 at 11:39 AM. This certificate is assigned 008762326.



May Massiello
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.