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Email Address: jfigler@slk-law.com

Foreign Limited Liability Company

KRA, LLC

Certificate of Status	0
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Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

N. Cuiligan

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

I. KRA, 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 wriconsent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C." "LLC.")					
(Jurisdiction under the law of which foreign limited company is organized)	iability	(FEI number, if	applicable)		
4. 11/09/2010	5. Perpet	ual	***************************************		
(Date of Organization)	(Durati exist or	ion: Year limited liabil r "perpetual")	ity company will cease to		
6. (Date first transacted busin (See sections 608.50) & 608	ess in Florida, if pric 502 F.S. to determin	or to registration.) ne penalty liability)	JAN -4		
7. 3225 S. MacDill Avenue, Suite 129	-127		<u>></u>		
T			ထ္		
Tampa, FL 33629	Address of Principal	Office	 ω		
·	·		5		
8. If limited liability company is a manager-n	anaged company	, check here 🗸			
9. The name and usual business addresses of	he managing mer	nbers or managers	are as follows:		
Donald A. Whidden, 3225 S. MacDill	Avenue, Suite	129-127, Tampa	, FL 33629		
Margarita Whidden, 3225 S. Mac	Dill Avenue, S	uite 129-127, T	ampa, FL 33629		
10. Attached is an original certificate of existence, no more the jurisdiction under the law of which it is organized. (A translation of the certificate under oath of the translator mu	photocopy is not acce				
		d in Florida, ANV i	and all lawful		
11. Nature of business or purposes to be cond	iciea or promoted	d III Pionida.			

Typed or printed name of signee

A. Edward McGinty

(In accordance with section 608.408(3), P.S., the execution of this decordent 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.)

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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.

If unavailable, the alternate to be used in the state of Florida is:				
The name and the Florida street a	ddress of the registered agent and office are	·		
. The name and the Florida street a	adress of the registered agent and office are	# VIS		
A. Edward McGint	ty			
	(Name)	OF C		
101 E. Kennedy	Blvd., Suite 2800	=		
Florida St	reet Address (P.O. Box NOT ACCEPTABLE)	œ		
Tampa	ET 33602	36		
Tampa	FL 33002 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.

ionature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

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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,

KRA, LLC

is a Limited Liability Company

formed or qualified under the laws of Wyoming did on **November 9, 2010**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2010-000592369**.

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 30th day of December, 2010 at 8:17 AM. This certificate is assigned 009013420.



May Market

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.