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FEB - 9 2011

**EXAMINER** 

SECRETARY OF STATE DIVISION OF CORPORATIONS

11 FEB -9 PH 2: 13

## FLORIDA FILING & SEARCH SERVICES, INC. P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

C. 1418 9 942:

DATE:

02-09-11

NAME:

TUTORS WITH COMPUTERS LLC

TYPE OF FILING: APPLICATION BY FOREIGN LLC TO TRANSACT

**BUSINESS IN FLORIDA** 

COST:

\$125

**RETURN:** 

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

DGE CHEOLSE

#### **COVER LETTER**

| Division of Corporations  |   |  |
|---|---|--|
| SUBJECT: Tutors with Computers,   | LLC   |  |
|   | e of Limited Liability Company  |  |
| The enclosed "Application by Foreign Limited Liabil<br>Existence, and check are submitted to register the abo | lity Company for Authorization to Transact Business in Florida," Certificate of<br>ove referenced foreign limited liability company to transact business in Florida |  |
| Please return all correspondence concerning this matt   | ter to the following:   |  |
| Kerry Jester  |   |  |
|   | Name of Person  |  |
| American incorporators  |   |  |
|   | Firm/Company  |  |
| 1220 North Market Stree   | et Ste 808  |  |
|   | Address   |  |
| Wilmington, DE 19801  |   |  |
|   | City/State and Zip Code   |  |
| kerryj@allcorp.com  |   |  |
| E-mail address: (to   | be used for future annual report notification)  |  |
| For further information concerning this matter, please  | e call:   |  |
| Kerry Jester  | u (302 ) 421-5752   |  |
| Name of Person  | Area Code & Daytime Telephone Number  |  |
| MAILING ADDRESS:<br>Division of Corporations  | STREET ADDRESS: Division of Corporations  |  |
| Registration Section P.O. Box 6327  | Registration Section Clifton Building   |  |
| Tallahasyce, Fl. 32314  | 2661 Executive Center Circle Tallahassee, FL 32301  |  |
| Enclosed is a check for the following amoun   |   |  |
| \$125.00 Filling Pee \$130.00 Filling Fee Certificate of Statu  | t & 3155.00 Filing Fee & 5160.00 Filing Fee, Certificate of Status & Certified Copy   |  |

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

IN COMPLIANCE WITH SECTION (ORSIS), FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

| Ш   | MITED LLABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:   |
|-----|---|
| ı.  | Tutors with Computers, LLC  |
|     | (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")  |
| CO1 | name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the writtensent of the managers or managing members adopting the alternate name. The atternate name must include "Limited Liability mpany," "L.L.C," "LLC.") |
| 2.  | Texas 3   |
|     | (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)  |
| 4.  | 09/10/2009 5, Perpetual   |
|     | (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")  |
| 6.  |   |
| υ.  | (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)   |
| 7.  | 701 Brazos Street Ste 500   |
|     | Austin, TX 78701  |
|     | (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:   |
|     | David Callaway- 701 Brazos Street Ste 500 Austin, TX 78701  |
|     |   |
|     |   |
|     |   |
| 10  | . Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records it   |
|     | ejurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a fibreign language, a relation of the certificate under oath of the translator must be submitted.)  |
|     | ·   |
| 11  | . Nature of business or purposes to be conducted or promoted in Florida:  |
|     | Tutoring  |
|     |   |
|     | Signature of a member of an authorized representative of a member.  |
|     | (In accordance with section 608,408(3), F.S., the execution of this document constitutes as 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.)   |
|     | David Callaway  |
|     | Typed or printed name 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.

| Tutors with Computers, LLC                    |   |  |  |
|---|---|--|--|
| If unavailable, the alternate to be used in t | he state of Florida is:                   |  |  |
| 2. The name and the Florida street address    | s of the registered agent and office are: |  |  |
| Florida Filing & Search                       | Services, Inc.                            |  |  |
|   | (Name)                                    |  |  |
| 155 Office Plaza Dri                          | ve Sulte A                                |  |  |
| Florida Street Ad                             | ddress (P.O. Box NOT ACCEPTABLE)          |  |  |
| Tallahasse                                    | FL 32301                                  |  |  |
|   | 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)

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional) Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Hope Andrade Secretary of State

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## Office of the Secretary of State

### Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Tutors with Computers, LLC (file number 801169181), a Domestic Limited Liability Company (LLC), was filed in this office on September 10, 2009.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on January 18, 2011.



Phone: (512) 463-5555

Prepared by: SOS-WEB

Hope Andrade Secretary of State

Come visit us on the internet at http://www.sos.state.tx.us-Fax: (512) 463-5709

TID: 10264

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