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(Requestor's Name)
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PICK-UP WAIT MAIL
– –
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
L. SELLERS
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COVER LETTER

Registration Section
Division of Corporations

TO:



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 10, 2010

JYRKI IKONEN 14055 46TH STREET NORTH, STE. 1102 CLEARWATER, FL 33762

SUBJECT: GALAXY MARKETING SOLUTIONS, LLC

Ref. Number: W10000052885

We have received your document for GALAXY MARKETING SOLUTIONS, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$777.50.

6/1/08

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.

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.

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: 010A00026548



February 17, 2011

Florida Department of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

Attention: Regulatory Specialist II

Enclosed please find the completed application for Foreign Limited Liability Company for Authorization to Transact Business in Florida.

Per the letter you sent on November 10, 2010, Number 9 of the form has been completed as well as a Certificate of Good Standing from the State of Alabama.

The Certificate of Good Standing was quite a challenge as there was something outstanding from 2004, of which we were unaware of, and it took quite a number of calls, etc. to get it all handled. The Certificate is printed out from their web site and can only be obtained if all past-due amounts are paid in full. We trust that this will be sufficient for your qualifications.

Also please find enclosed the \$777.50 needed to complete this application. I know it is over the 60 allowable days stated in your letter, however, due to the Certificate of Good Standing, it has taken longer. Your consideration is greatly appreciated in considering the processing of this application.

If you have any questions, please feel free to call 727-531-7171 and ask for Kathleen, or email <u>Kathleen@galaxymarketingsolutions.com</u>.

Thank you, I will await your reply,

Kathleen E. Lettau

CFO

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: ,
1. GALA-X-9 MARKE TING SOLOTIONS, 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 written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")
2. ALABAMA (Jurisdiction under the law of which foreign limited liability company is organized) 3. 90-0234/55 (FEI number, if applicable)
4. 7-14-2004 (Date of Organization) 5. PERPETUAL (Duration: Year limited liability company will cease to exist or "perpetual")
6. JUNE 1 2008 (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 14055 46 Streat, NORTH - SUITE 1102
Clearwater, FL. 33762 (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:
JYRKI TKONEN, 14055 46 5/REST, NORTH SURTE 1102
TYRK! TKONEN, 14055 46 5/Rost, NORTH SURTE 1102 (MGRM) Clearwofer, FC. 33762 5
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: MANKETING,
DIRECT MAILING, INTERNET & WEBSITES.
Signature of a member or an authorized representative of a member. (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 1 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.) TYRK: TKONEN
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.

1. The name of the Limited Liability Company is:
GALAXY MARKETING SOLUTIONS, 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:
Jyrki TKONEN (Name)
14055 46 5tree t. NORTH - Suits 1102 Florida Street Address (P.O. Box NOT ACCEPTABLE)
C/EARWATER FL 33756 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)



State of Alabama Department of Revenue

Certificate of Good Standing

Galaxy Marketing Solutions LLC is in compliance with the requirements in Chapter 14A, Title 40, Code of Alabama 1975 relating to (Business Privilege and Corporate Shares Tax), as applicable through the taxable year 12/31/2010.

IN WITNESS WHEREOF, I hereunto set my hand this date of February 15, 2011.

Richard A. Homeyer

Director, Individual and Corporate Tax Division

ATTEST:

Secretary

Business Privilege Tax

Request Date: February 15, 2011 Request Code: 1102152374129 Phone: 334-353-7923