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K. SALY EXAMINER APR 7 2011



March 30, 2011

SATYANAUD SHARMA 809 MONTCLAIRE CT. WELLINGTON, FL 33411

SUBJECT: S&S FAMILY ENTERPRISE SERVICES LLC

Ref. Number: W11000018071

We have received your document for S&S FAMILY ENTERPRISE SERVICES LLC and your check(s) totaling \$175.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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.

Letter Number: 211A00007745

Karen A Saly Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO:

Registration Section

Division of Corporations
SUBJECT: SSS FAMILY ENTERPRISES LLC Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of 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:
SATYANAND SHARMA Name of Person
545 7AMILY ENTERPRISES LLC. Firm/Company
809 MONTCLAIRE CT. Address
WELLINGTON FL 33411 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
SATYANAND SHARMA at (561) 779-5437 Name of Person Area Code & Daytime Telephone Number
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301
Enclosed is a check for the following amount: \$\int\\$\$125.00 Filing Fee \times \text{\$\frac{1}{3}130.00 Filing Fee & Certificate of Status}\$\$\$Certificate of Status \times \text{\$\frac{1}{3}155.00 Filing Fee & Certificate Copy}\$\$\$\$\$
Already Paid!

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: Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC." ENTER PRISE SERVICES FAMILY (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.") (Jurisdiction under the law of which foreign limited liability (Duration: Year limited liability company will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) PALM 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: 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: CONSULTING

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. 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.)

SATYANAND SHARMA

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:	
SGS FAMILY ENTERPRISES LLC	 -
If unavailable, the alternate to be used in the state of Florida is:	
SGS FAMILY ENTERPRISE SERVICES LL	<u>C</u> .
2. The name and the Florida street address of the registered agent and office are:	
SATYANAND SHARMA (Name)	
(Name)	
809 MONTCLAIRE CT.	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	
WELLINGTON FL 33411 City/State/Zip	
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 reginagent 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.	sterea
Same -	
(Signature)	

Filing Fee for Application

Certified Copy (optional)

Designation of Registered Agent

Certificate of Status (optional)

\$ 100.00

\$ 25.00

\$ 30.00

\$ 5.00

OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE

I, Scott Gessler, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

S&S Family Enterprises, L.L.C.

is a Limited Liability Company formed or registered on 02/09/2006 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20061060668.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 03/14/2011 that have been posted, and by documents delivered to this office electronically through 03/16/2011 @ 12:02:47.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Denver, Colorado on 03/16/2011 @ 12:02:47 pursuant to and in accordance with applicable law. This certificate is assigned Confirmation Number 7893564.



Secretary of State of the State of Colorado

****************End of Certificate***

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Certificate Confirmation Page of the Secretary of State's Web site, http://www.sos.state.co.us/biz/CertificateSearchCriteria.do entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, http://www.sos.state.co.us/click Business Center and select "Frequently Asked Questions."