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PICK-UP		MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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ALE AHASSEE FLORID

C. LEWIS APR _ R 2011 EXAMINER



TRANSMITTAL LETTER

TO: Registration Section Division of Corporations

SUBJECT: Currawong (Head) 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:

Cammie Warburton

(Name of Person)

Corporate Direct, Inc.

(Firm/Company)

2248 Meridian Blvd., Suite H

(Address)

Minden, NV 89423

(City/State and Zip Code)

For further information concerning this matter, please call:

Cammie Warburtonat (775)284-7162(Name of Person)(Area Code & Daytime Telephone Number)STREET ADDRESS:MAILING ADDRESS:Registration SectionRegistration SectionDivision of CorporationsDivision of Corporations409 E. Gaines StreetP.O. Box 6327Tallahassee, Florida 32399Tallahassee, Florida 32314

Enclosed is a check for the following amount:

□ \$125.00 Filing Fee □ \$130.00 Filing Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate Certificate of Status Certified Copy of Status & Certified Copy



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.	L CURRAWONG (HEAD) LLC		
(Name of Foreign Limited Liability Company)			
~.	Wyoming 3. (Jurisdiction under the law of which foreign limited liability company is organized) 3.		
4.	February 3, 2011 5. Perpetual (Date of Organization) 5. (Duration: Year limited liability company will cease to exist or "perpetual")		
6.	February 2011		
0.	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)		
7.	7_ 60 East Simpson Ave., Box 2869		
Jackson, WY 83001			
(Street Address of Principal Office)			
8.	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:		
	Kiss Family Trust		
	Post Office Box 2869		
	Jackson, WY 83001		

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: To hold and manage

investments

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.) Lisa Kiss, Trustee for Kiss Family Trust, Member

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Typed or printed name of signee

2011 APR -7. AM 10: 59

SECRETARILOF STATES TALLAHASSEETEDORIDA

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:

Currawong (Head) LLC

2. The name and the Florida street address of the registered agent and office are:

Gerri Detweiler

(Name)

3490 Piedmont Road, Suite 1500

Florida Street Address (P.O. Box NOT ACCEPTABLE)

Sarasota

FL 34232 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 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,

CURRAWONG (HEAD) LLC

is a Limited Liability Company

formed or qualified under the laws of Wyoming did on **February 3, 2011**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2011-000596428**.

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 1st day of April, 2011 at 12:04 PM. This certificate is assigned 009673530.



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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.