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#### **COVER LETTER**

TO: Registration Sect Division of Corp			
su <b>в</b> јест: <u>Syono</u>	geBob Charters, LLC Name of Limited Lie	ability Company	
The enclosed "Application Existence, and check are s	n by Foreign Limited Liability Company for submitted to register the above referenced f	or Authorization to Transact Business in Florida," Certi foreign limited liability company to transact business in	ificate of n Florida
Please return all correspor	ndence concerning this matter to the follow	ing:	
	Lana Parks Name of F		
	Name of F	Person Person	
	Firm/Com	•	
	Address: (to be used for fin	ive	
	Addre	ess	
(	Aulf Breeze, Fr 3	32563	
	City/State and	Zip Code	
	E-mail address: (to be used for fut	mail - UM)  ure annual report notification)	
For further information co	oncerning this matter, please call:	,	
1,		850, 512-6255	
	Name of Person Area Code	& Daytime Telephone Number	
MAILING ADD Division of Corp Registration Sect P.O. Box 6327 Tallahassee, FL 3	orations Division of Co ion Registration Se Clifton Buildin	rporations ection ig e Center Circle	
Enclosed is a check for \$125.00 Filing Fe	or the following amount:  ee \$\int\\$130.00 \text{ Filing Fee & Certificate of Status}\$  Certificate of Status	Filing Fee & \$160.00 Filing Fee, Certificate of Status & Certified Copy	

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:  1. 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.")
(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. Wyowing (Jurisdiction under the law of which foreign limited liability company is organized)  3. 45. 219811 6 (FEI number, if applicable)
4. May 11, 2011  (Date of Organization)  5. purpletual  (Duration: Year limited liability company will cease to exist or "perpetual")
6. Nove yet  (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)  7. 1364 Calculta Dr.
Early Breeze, Pt 32563 (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:
Lana Parks 1366 Calcutta Drive, Eill Breeze, Fr 32563
Victoria Martinez 1360 Calculta Drive, Gulf Breeze, Pr 32563 Daviel Parks, 1610 W. Chilst 87 Pensacola, Pr 32563
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: Office Travel
sales Juna M
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.)  And Powes  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:			
Spongebob Charters, LIC			
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:			
Laver Parks			
(Name)			
1366 Calcutta Drive Florida Street Address (P.O. Box NOT ACCEPTABLE)			
Gulf Breeze, FL 32543 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)

SECRETARY OF STATE DIVISION OF CORPERATIONS

## 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,

#### SpongeBob Charters, LLC

is a **Limited Liability Company** 

formed or qualified under the laws of Wyoming did on **May 11, 2011**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2011-000601301**.

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 10th day of June, 2011 at 11:47 AM. This certificate is assigned 010151112.



Maj Malfield 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.