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PICK-UP WAIT MAIL			
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Certified Copies Certificates of Status			
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SECRETARY OF STATE

TALLAHASSEF FLORIN

#### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: PEARLS PLUS, 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:
Maxine D. Horowitz
Name of Person
Pearls Plus, LLC
Firm/Company
14000 Military Trail, Suite 204-D
Address
Delray Beach, Florida 33484
City/State and Zip Code
maxine@mdhsearch.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Frederick E. Schubert, CPA at (480 ) 951-5202
Name of Person Area Code & Daytime Telephone Number
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration Section
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount:  \$\sigma\$\$\frac{1}{2}\$125.00 \text{ Filing Fee}\$

## 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 LIARII ITY COMPANY TO TRANSACT RUSINESS IN THE STATE OF FLORIDA:

1. Pearls Plus, 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 consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Company," "L.L.C," "LLC.")	
2. Illinois (Jurisdiction under the law of which foreign limited liability company is organized)  3. Which foreign limited liability (FEI number, if applicable)	<del></del>
4. July 20, 2010  (Date of Organization)  5. Perpetual  (Duration: Year limited liability company will exist or "perpetual")	se to
6. July 15, 2011  (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	ML III PH
7. 14000 Military Trail, Suite 204-D, Delray Beach, FL 33484	1 : : : : : : : : : : : : : : : : : : :
(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:  Maxine D. Horowitz	
14000 Military Trail, Suite 204-D  Delray Beach, Florida 33484	
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign langual 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: Wholesale  Jewelry	
Signature of a member or an authorized representative of a member.  (In accordance with section 608 408(3), E.S., the execution of this document constitutes an affirmation under the	<del></del>

Typed or printed name of signee

Maxine D. Horowitz

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.)

## 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 o	of the Limited Liability Company is:	
Pearls Plu	us, LLC	
If unavailable,	, the alternate to be used in the state of Florida is:	
2. The name a	and the Florida street address of the registered agent and office are:	
	Maxine D. Horowitz (Name)	11 JUI SECRÉ
	14000 Military Trail, Suite 204-D  Florida Street Address (P.O. Box NOT ACCEPTABLE)	TARY OF S
	Delray Beach FL 33484	1: 41 LORIDA
	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.

Mexica Delarry 7/8/1,

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

File Number

0300948-3



## To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

PEARLS PLUS LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON JULY 20, 2010, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.



Authentication #: 1118001606

Authenticate at: http://www.cyberdriveillinois.com

### In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 29TH

day of

JUNE

A.D.

2011

Desse White

SECRETARY OF STATE