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JUL 1 2 2011

**EXAMINER** 



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DEPARTMENT OF STATE

DIVISION OF CORPORATIONS

SECRETARY OF STATE OF CORPORATION



ACCOUNT NO. : 12000000195

REFERENCE: 843374

7701701

AUTHORIZATION : O

COST LIMIT : \$ 160'.00

ORDER DATE : July 12, 2011

ORDER TIME : 4:44 PM

ORDER NO. : 843374-005

CUSTOMER NO: 7701701

#### FOREIGN FILINGS

NAME: VOUCHERRY, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XXX CERTIFIED COPY

\_\_\_ PLAIN STAMPED COPY

XXX\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Matthew Young -- EXT# 2962

EXAMINER:

#### **COVER LETTER**

	stration Section ion of Corporations		Ţ.
	. ) \		
SUBJECT:	Voucher	me of Limited Liability Compan	
	INA	me wit compan	у
The enclosed " Existence, and	'Application by Foreign Limited Lia check are submitted to register the a	bility Company for Authorization bove referenced foreign limited	n to Transact Business in Florida," Certificate of liability company to transact business in Florida
Please return a	all correspondence concerning this m	atter to the following:	
à'	lan S	Name of Person	
		Name of Person	
•	Vondre	VY LLC Firm/Company	
		Firm/Company	
	6931 Unive	ENSE PHICK	
		Address	
· :	winter Pan	City/State and Zip Code	12
•			
	jan schen	to be used for future annual repo	vy. com.
			nt notification)
For turther info	ormation concerning this matter, plea	se call:	
	lan Schenbri Name of Person	at (40) ?	5844200 Ext 800).
	Name of Person	Area Code & Daytime Tele	sphone Number
	ING ADDRESS: on of Corporations	STREET ADDRESS: Division of Corporations	
Regist	tration Section	Registration Section	
	Box 6327 hassee, FL 32314	Clifton Building 2661 Executive Center Circle	
1 411411	1839W, FD 36314	Tallahassee, FL 32301	
	check for the following amou		
<b>∐</b> \$125.0	00 Filing Fee \$130.00 Filing Fe Certificate of State		√\$160.00 Filing Fee, Certificate of Status & Certified Copy

### CATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TRANSACT BUSINESS IN FLORIDA PLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FORE . D 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.") name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written it of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability pany," "L.L.C." "LLC.") urisdiction under the law of which foreign limited liability inpany is organized) (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) (Street Address of Principal Office) If limited liability company is a manager-managed company, check here \( \sqrt{\sqrt{\sqrt{\gamma}}} \) The name and usual business addresses of the managing members or managers are as follows: niversity Blud, Winter Park, FL32792 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: 10 5ell on 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.)

lan Schenbas

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:
Vouchery, 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:
Corporation Service Company (Name)
1201 Hays Street  Florida Street Address (P.O. Box NOT ACCEPTABLE)
, , , , , , , , , , , , , , , , , , ,
Tallahassee FL 32301
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 registere 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.  Corporation Service Company  Matthew Young  By:  (Signature)  Matthew Young

\$ 100.00 Filing Fee for Application

\$ 25.00

\$ 30.00 \$ 5.00 Designation of Registered Agent

Certificate of Status (optional)

Certified Copy (optional)

# Delaware

PAGE 1

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "VOUCHERRY, LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING

AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE

SHOW, AS OF THE TWELFTH DAY OF JULY, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "VOUCHERRY, LLC" WAS FORMED ON THE FOURTEENTH DAY OF SEPTEMBER, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

4871527 8300

110813920

AUTHENTY CATION: 8896613

DATE: 07-12-11

You may verify this certificate online at corp. delaware.gov/authver.shtml