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SECRETARY OF STATE
FALLAHASSEE F. STATE

D. BRUCE

JUL 25 2011

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Mary Walker, LLC				
Name of Limited Liability Company				
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florie Existence, and check are submitted to register the above referenced foreign limited liability company to transact be				
Please return all correspondence concerning this matter to the following:				
Alan S. Fershtman				
Name of Person	_			
Keating Muething & Klekamp PLI				
Keating Muething & Klekamp PLL Firm/Company				
1 E. 4th St., Suite 1400	_			
Address				
Cincinnati, Ohio 45202				
City/State and Zip Code	_			
sshumate@kmklaw.com	਼ = ੁ =			
E mail address (to be used for future enough report notification)	L 22	1 1		
For further information concerning this matter, please call:				
Stacy Shumate at (513) 579-6465	PA D			
Stacy Shumate at (513) 579-6465 Name of Person Area Code & Daytime Telephone Number	<u>်</u> က လု			
MAILING ADDRESS: STREET ADDRESS: Division of Corporations Division of Corporations				
Registration Section Registration 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: \$\int\\$\$125.00 Filing Fee \$\int\\$\$\$\$Certificate of Status \$\int\\$\$\$Certified Copy \$\int\\$				

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:

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. Mary Walker, 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 of the writt consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")
2. Nevada 3.
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4. 6/18/2009 _{5.} perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6.
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. <u>514 Americas Way</u> , #1693
Box Elder, SD 57719
(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:
James Carmichael, 514 Americas Way, #1693, Box Elder, SD 57719
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records
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 outh of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: ownership and operation
of real estate
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.)
James Carmichael
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 nam	e of the Limited Liability C	ompany is:	
Mary W	alker, LLC		
If unavailab	ole, the alternate to be used i	n the state of Florida is:	
			Acr =
2. The nam	ne and the Florida street add	ress of the registered agent and office are	JUL 22 URETARY LAHASS
	National Corporate F	Research, Ltd., Inc.	The second
		(Name)	FLOG
	515 East Park Ave	· •	TATE
	Florida Stree	t Address (P.O. Box <u>NOT</u> 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 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)





CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, MARY WALKER, LLC, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since June 18, 2009, and is in good standing in this state.

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Electronic Certificate
Certificate Number: C20110720-1367
You may verify this electronic certificate
online at http://www.nvsos.gov/

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on July 20, 2011.

ROSS MILLER Secretary of State