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B. BOSTICK 6 2011.

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EXAMINER

COVER LETTER

TO:

Registration Section

SUBJECT: PICHURZ LLC	Name of Limited Liability Company	
	Liability Company for Authorization to Transact Business in Flori	da " Certificate of
Existence, and check are submitted to register th	e above referenced foreign limited liability company to transact b	usiness in Florida.
Please return all correspondence concerning this	matter to the following:	
ALFONZO BROOKS		
- · · · · · · · · · · · · · · · · · · ·	Name of Person	_
PICHURZ LLC		
	Firm/Company	_
3140 W KENNEDY B	LVD	
	Address	_
TAMPA FL 33609		
	City/State and Zip Code	_
ALFONZOBROOKS	S@YAHOO.COM ≅₀	
E-mail address	s: (to be used for future annual report notification)	_ =
For further information concerning this matter, p	lease call:	
	ကြွန်း ကြွန်း	ر ال
FREDERICK HUTSON	at (702) 305-1187	
Name of Person	Area Code & Daytime Telephone Number STREET ADDRESS: Division of Corporations	PM 12: 08
MAILING ADDRESS:	STREET ADDRESS:	: 4 0
Division of Corporations	Division of Corporations	יי כט
Registration Section	Registration Section	
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	

\$155.00 Filing Fee & Certified Copy

\$160.00 Filing Fee, Certificate of Status & Certified Copy

\$130.00 Filing Fee & Certificate of Status

\$125.00 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 LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

PICHURZ LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
f name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the writtensent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability ompany," "L.L.C," "LLC.")
NEVADA Secretary of State (Jurisdiction under the law of which foreign limited liability company is organized) 3. 453277558 (FEI number, if applicable)
September 16, 2011 (Date of Organization) 5. "perpetual" (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)
3140 W KENNEDY BLVD SUITE 119
TAMPA FL, 33609 (Street Address of Principal Office) If limited liability company is a manager-managed company, check here ✓
The name and usual business addresses of the managing members or managers are as follows: ALFONZO BROOKS 3140 W KENNEDY BLVD SUITE 119 TAMPA FL, 33609
Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, an estation of the certificate under oath of the translator must be submitted.) Nature of business or purposes to be conducted or promoted in Florida: INTERNET/RETAIL
ild 2
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.)

ALFONZO BROOKS

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:	
PICHURZ 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:	
ALFONZO BROOKS	
(Name)	
TAMPA FL, 33609 FL City/State/Zip	D []
Having been named as registered agent and to accept service of process for the above stated limite liability company at the place designated in this certificate, I hereby accept the appointment as regagent 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 to obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes. (Signature)	gistered s

Filing Fee for Application

Certified Copy (optional)
Certificate of Status (optional)

Designation of Registered Agent

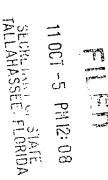
\$ 100.00

\$ 25.00 \$ 30.00

5.00

SECRETARY OF STATE





LIMITED LIABILITY COMPANY CHARTER

I, ROSS MILLER, the Nevada Secretary of State, do hereby certify that **PICHURZ LLC**. did on September 16, 2011, file in this office the Articles of Organization for a Limited Liability Company, that said Articles of Organization are now on file and of record in the office of the Nevada Secretary of State, and further, that said Articles contain all the provisions required by the laws governing Limited Liability Companies in the State of Nevada.



Certified By: Electronic Filing Certificate Number: C20110916-1548 You may verify this 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 September 16, 2011.

ROSS MILLER Secretary of State