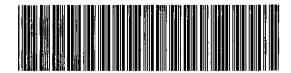


(Red	questor's Name)	
- (Ado	dress)	
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PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nam	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	

G. MCLEOD

OCT 19 2011

EXAMINER



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FILED

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SECRETARY OF STATE
SECRETARY OF STATE

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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: 19 Chomius Company LLC Deing busens of Touch Solutions (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:
J. Ross Franklin (Name of Person)
Pachamius Campony LLC (Firm/Company)
12198 Long was d Dr (Address)
Misacola, FL 32507 (City/State and Zip Code)
For further information concerning this matter, please call:
1 Roga Franklin at (350) 492 9399
MAILING ADDRESS: STREET ADDRESS: Division of Companytions
Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building
Tallahassee, FL 32314 Citton Bunding 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: \$\Begin{align*} \pm

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

	TH SECTION 608.503, FLORI OMPANY TO TRANSACT BUSI		OLLOWING IS SUBMITTED : F.F.L.ORIDA :	TO REGISTER A FOR	PEIGN
<i>(</i>)	1	110	7		
(Name of Forei	ign Limited Liability Compan	y, myst include "Limited	d Liability Company," "L.L.C	.," or "LLC.")	
(If name unavailable, e consent of the manager Company," "L.L.C,"	ers or managing members ado	for the purpose of transapting the alternate name	acting business in Florida and a . The alternate name must inc	nttach a copy of the wr lude "Limited Liability	itten y
2. Peway L./ (Jurisdiction under the company is organize	the law of which foreign limit	ited liability	(FEI number, if application	able)	
4. <u>03/1</u> (Date	1996 e of Organization	5. <u>fl</u> (Durat exist o	viletua ion. Year limited liability com r "perpetual")	ipany will cease to	
6. Not y	Applicable (Date first transacted by (See sections 608.501 &	deyos, by On usiness in Florida, if prid 608.502 F.S. to determi	St to registration.) ne penalty liability)	e posines	S S
7. <u>/2/9</u>	8 Longwood	Dup			
RASA	cola, FZ 3ã	2507		Zv.	
8. If limited liability	ty company is a manager	reet Address of Principa r-managed company	,	I OCT IS	i i
9. The name and u	ısual business addresses	of the managing me	mbers or managers are as	foldows:	1
JROS;				F STA	;
12/98	Long wood	Dros		©mi 601	
Pensa	cola, TC	32507		****	•
the jurisdiction under the ranslation of the certific	ne law of which it is organized. cate under oath of the translator	(A photocopy is not acc r must be submitted.) - Gu	aly authenticated by the official eptable. If the certificate is in a on Internet.	foreign language, a 9 <i>Or 19 1114 9 M</i>	
11. Nature of busin	ness or purposes to be co	enducted or promoted	d in Florida: Wb SA	(p)	
(Man :	La les		•	
	Signature of a member (In accordance with section an affirmation under the per	608.408(3), F.S., the execu	epresentative of a member ation of this document constitutes acts stated herein are true.)	— Эг. ∙	
		SS Frankly			

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:	
Pachamus Company 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:	
J Ross Franklin (Name)	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	
- Rusacola FL 32507	

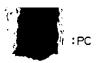
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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.

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)





Arkansas Secretary of State Mark Martin

State Capitol Building • Little Rock, Arkansas 72201-1094 • 501.682.3409

CERTIFICATE OF EXISTENCE

I, Mark Martin, Arkansas Secretary of State of the State of Arkansas, and as such, keeper of the records of domestic and foreign corporations, do hereby certify that the records of this office show

PACHOMIUS COMPANY, L.L.C.

authorized to transact business in the State of Arkansas as a Limited Liability Company, filed a Articles of Organization in this office March 18, 1996.

Our records reflect said entity has paid all fees, taxes and penalties owed to this State, as required to be collected by this office, and has delivered its most current annual franchise tax report to this office.

I certify this entity has not filed articles of dissolution with this office.

In Testimony Whereof, I have hereunto set my hand and affixed my official Scal. Done at my office in the City of Little Rock, this 13th day of October, 2011.

Mark Martin

Arkansas Secretary of State

Monica Humphrey

Mark Martin

