

#### Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To:

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Division of Corporations

Fax Number : (850)617-6383

**EXAMINER** 

From:

Account Name : HARVARD BUSINESS SERVICES, INC.

Account Number: 120080000045 Phone : (302) 645-7400 Fax Number : (302)645-1280

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: nangelides@gmail.com

### Foreign Limited Liability Company ANGEN, LLC

Certificate of Status Certified Copy 04 Page Count \$130.00 Estimated Charge

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To:

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

IN COMPLIANCE WITH SECTION 60\$503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THIS STATE OF FLORIDA ANGEN, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, onler alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC," Delaware (PEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) November 7, 2011 perpetual (Duration: Yem limited liability company will cease to exist or "perpenual") (Date of Organization) 6. No business transacted in Florida prior to registration

(Date first transacted business in Florida, if prior to registration.)

(See sections 608.501 & 608.502 F.S. to determine penalty liability) 7 600 W. Hillsboro Boulevard, Suite 102 Deerfield Beach, FL 33441 (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: Nicholas Angelides, Member, 600 W. Hillsboro Blvd, Sulte 102, Deerfield Beach, FL 33441 Kelly Bear, Member, 600 W. Hillsboro Blvd, Suite 102, Deerfield Beach, FL 33441 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official baving 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 nanslation of the certificate under onth of the translator trust be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: Any legal purpose 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 ponolties of persury that the facts stated become to true.) Nicholas Angelides, Member Typed or printed name of signee

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# 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:
ANGEN, 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:
Nicholas Angelides
(Name)
600 W. Hillsboro Boulevard, Suite 102
Florida Street Addiesa (P.O. Box NOT ACCEPTABLE)
Deerfield Beach, Ft. 33441
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.

Mich (Signature)

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

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# Delaware

## The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ANGEN, 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 NINTH DAY OF NOVEMBER, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ANGEN, LLC" WAS FORMED ON THE SEVENTH DAY OF NOVEMBER, A.D. 2011.

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AUTHENTICATION: 9147342

DATE: 11-09-11

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