tion of Co Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations Fax Number : (850)617-6383

From:

Account Name	:	C T CORPORATION	SYSTEM
Account Number	:	FCA00000023	
Phone	:	(850)222-1092	
Fax Number	:	(850)878-5368	

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

Email Address:

Foreign Limited Liability Company 2 Stellar North America, LLC FEB T. Certificate of Status 0 PH (\$ ا 同志の自い性の Certified Copy 0 AH 8: 54 **ן ד**ו STATE AS Page Count 05 12 FEB 13 Estimated Charge \$125.00 Corporate Filing Mere. MCLEOD Electronic Filing Menu

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EXAMIN

https://efile.sunbiz.org/scripts/efilcovr.exe

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: STELLAR NORTH AMERICA, LLC

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 roturn all correspondence concorning this matter to the following:

NANCY GARCIA, COMPLIANCE

Name of Person

STELLAR NORTH AMERICA, LLC

Firm/Company

130 E JOHN CARPENTER FWY

Address

IRVING, TX 75062

City/State and Zip Code

NGARCLA@JFOGROUP.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NANCY GARCIA	at (972) 999-4558
Name of Person	Ares Code & Daytime Telephone Number

MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tellahassee, FL 32314

\$125.00 Filing Fee

d'

STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Taliabasses, PL 32301

Enclosed is a check for the following amount:

S130.00 Filing For & Certificate of Status

S155.00 Filing Foc & S160.00 Filing Foc, Certificate Certified Copy of Status & Certified Copy

FL817 - (005/3818 C T Byrton Online

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA

1. STELLAR NORTH AMERICA, LLC

(Name of Foreign Limited Liebility Company; russ include "Limited Liability Company," "LLC," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florids 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." "L.C."

2.	NEVADA	3
	(Jurisdiction under the law of which foreign limited liability	-
	company is organized)	

3. 26-4194805 (7Bi number, if applicable)

4. 02/03/2009

б.

(Dets of Organization)

5. PERPETUAL (Duration: Year limited Hability company will cases to exist or "perpetual")

130 B JOHN CARPENTER FWY	<u>S</u> ee	び
ERVING, TX 75062		1
(Street Address of Principal Office)	ASSE	8
If limited liability company is a manager-managed company, check here 🔀		3 AF
The name and usual business addresses of the managing members or managers are as follows:		₩
PETER TROWBRIDGE, 130 B JOHN CARPENTER FWY, IRVING, TX 75062	P Z	ះ ភ្
ARTHUR HUXTABLE, 130 E JOHN CARPENTER FWY, IRVING, TX 75062	¥-	

LEN SUAZO, 130 B JOHN CARPENTER FWY, IRVING, TX 75062

10. Attached is an original cattificate of existence, no more than 90 days old, duly authenticated by the official having castedy of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the castificate is in a foreign language, a translation of the castificate under call of the translationmust be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida:

center 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 staled bersin are true. I am sware that any false information submitted in a document to the Department of State conscitutes a third degree felony as provided for in a.817.155, F.S.) LEN SUAZO . . Typed or printed name of signes . <u>. .</u> ····· . . . ÷. PLAT? - IOSS2018 C T Byone Oxing <u>د</u> <u>ل</u>ست تر.

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:

STELLAR NORTH AMERICA, LLC

2. 4 T

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:

C T Corporation System
(Name)

1200 South Pine Island Road
Florida Street Address (P.O. Box NOT ACCEPTABLE)

Plantation
FL 33324
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. C T Capacitan System

By:		(Signa	Michael E. Joner Assistant Secretery
	/.		Filing Fee for Application Designation of Registered Agent Certified Copy (optional) Certificate of Status (optional)
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