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SECRETARY OF STATE

COVER LETTER

TO:

	Registration Section Division of Corporations			
SUBJEC				
	Na	ame of Limited Liability Compan	у	
			n to Transact Business in Florida," Certificate liability company to transact business in Flori	
Please ret	turn all correspondence concerning this m	natter to the following:		
	Tasha Murray			
		Name of Person		
	Murray Management, LL	C		
	-	Firm/Company		
	0040.0	110.00		
	9312 Crescent Loop Ci			
		Address		
	Tampa, FL 33619		3EC)	
		City/State and Zip Code	HAS E	
		- O 1	SSE I	
	murraymanagementll E-mail address:	C@gmall.com	ort notification)	
For furthe	er information concerning this matter, ple		SECHETARY OF STATE AT HOUSE CORIDA	
-	Tasha Murray	at (727) 4	158-8039	
_	Name of Person	Area Code & Daytime Tele	ephone Number	
I 1 1	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Fallahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		
	d is a check for the following amounts at the following at the following amounts at the following	ee & \$\int\\$155.00 Filing Fee &	\$160.00 Filing Fee, Certificate of Status & Certified Copy	

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:

1. Murray Mana (Name of Fore	agement, LLC	de "Limited Liability Company," "L.L.C.,"	or "LLC.")
·			·
	enter alternate name adopted for the purposers or managing members adopting the alter "LLC.")		
2. Nevada (Jurisdiction under company is organization)	the law of which foreign limited liability	. 45-4475838 (FEI number, if applicable	e)
4. 01/23/2012 (Da	te of Organization) 5	Perpetual (Duration: Year limited liability compaexist or "perpetual")	any will cease to
6. N/A			
0.	(Date first transacted business in Flo (See sections 608.501 & 608.502 F.S.	orida, if prior to registration.) to determine penalty liability)	
7. 9312 Cresc	ent Loop Cir. #302		
Tampa, FL 3	3619		
	(Street Address	of Principal Office)	
8. If limited liabil	lity company is a manager-managed	company, check here 🗸	2012FEB
9. The name and	usual business addresses of the mana	aging members or managers are as fo	ollows &
Tasha Murra	y & Steve Murray		SEE SEE
9312 Creso	cent Loop Cir. #302		F 3 2 M
Tampa, FL	33619		3 3
the jurisdiction under t	ginal certificate of existence, no more than 90 d the law of which it is organized. (A photocopy icate under oath of the translator must be subm	y is not acceptable. If the certificate is in a for	-
11. Nature of bus	iness or purposes to be conducted or	promoted in Florida: Real estate	investment
	Cem	N	•
	Signature of a member or an aut	horized representative of a member	
•	cordance with section 608.408(3), F.S., the executies of perjury that the facts stated herein are tru		

Typed or printed name of signee

Tasha Murray

document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

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:	
Murray Management, LL	C	
If unavailable, the alternate to be used	d in the state of Florida is:	
2. The name and the Florida street ac	Idress of the registered agent and office are:	2012 FEB
Tasha Murray		A A A A A A A A A A A A A A A A A A A
	(Name)	BI3 PASSEY
9312 Crescent L	oop Cir. #302	
Florida Str	eet Address (P.O. Box NOT ACCEPTABLE)	STATE LORIDA
Tampa	_{FL} 33619	,s 40
	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)

SECRETARY OF STATE



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, MURRAY MANAGEMENT, 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 January 23, 2012, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on February 2, 2012.

ROSS MILLER Secretary of State

Electronic Certificate
Certificate Number: C20120202-2059
You may verify this electronic certificate
online at http://www.nvsos.gov/