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COVER LETTER

TO:

Registration Section

Division of Corporations				
SUBJECT: Plexor Marketing 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 return all correspondence concerning this matter to the following:				
David Daughtrey				
Name of Person				
Plexor Marketing LLC				
Firm/Company				
15222 Creek Hills Rd.				
Address				
El Cajon, CA 92021				
City/State and Zip Code				
plexor@earthlink.net				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
David Daughtrey at (760) 554-6460				
Name of Person Area Code & Daytime Telephone Number				
MAILING ADDRESS: Division of Corporations STREET ADDRESS: Division of Corporations				
Registration Section Registration Section				
P.O. Box 6327 Clifton Building				
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301				
Enclosed is a check for the following amount:				
\$125.00 Filing Fee \$\ \text{Certificate of Status}\$155.00 Filing Fee & \text{\$160.00 Filing Fee, Certificate of Status}\$\$				

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:

LIMITED LIABILITY COMPANY TO TRANSACT B	PUSINESS IN THE STATE OF FLORIDA:	
1 Plexor Marketing LLC		
(Name of Foreign Limited Liability Con	npany; must include "Limited Liability Company," "L.L.C.,"	or "LLC.")
	sted for the purpose of transacting business in Florida and atta adopting the alternate name. The alternate name must include	
2 Nevada	3. 20-4598632	
(Jurisdiction under the law of which foreign I company is organized)	limited liability (FEI number, if applicable	:)
_{4.} March 17, 2006	_{5.} perpetual	
(Date of Organization)	(Duration: Year limited liability comparexist or "perpetual")	ny will cease to
5.		
(Date first transacte (See sections 608.50	ed business in Florida, if prior to registration.) 1 & 608.502 F.S. to determine penalty liability)	S SIVIO
7. 400 Dorla Ct.		VISION
Zephyr Cove, NV 89448	•	OF CO
	(Street Address of Principal Office)	포장의
3. If limited liability company is a mana	ager-managed company, check here	of STATE AND STATE AND STATE ON STATE O
9. The name and usual business address	ses of the managing members or managers are as fo	
David Daughtrey		
PO Box 12187, Zephyr Cove, NV	V 89448	
400 Dorla Ct. Zephyr Cove, NV 8	9448	
	no more than 90 days old, duly authenticated by the official hav zed. (A photocopy is not acceptable. If the certificate is in a fore lator must be submitted.)	
11. Nature of business or purposes to be	e conducted or promoted in Florida: Educate inde	ependent
distributors on how to market and		·
Keba	o Vaeoug	
_	ember or an authorized representative of a member.	
•	8(3), F.S., the execution of this document constitutes an affirmation stated herein are true. I am aware that any false information sub-	

Typed or printed name of signee

David Daughtrey

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 Limite	d Liability Comp	any is:	
Plexor Marketing LLC			
If unavailable, the alternate	e to be used in the	e state of Florida is:	
2. The name and the Flori	da street address o	of the registered agent and office are:	
Fabio Var	ona		
		(Name)	_
7777 Wes	t Glades Road,	Suite 100	_
	Florida Street Add	ress (P.O. Box <u>NOT</u> ACCEPTABLE)	
Boca Ra	ton	FL 33434	
- 		City/State/Zip	-
liability company at the placagent and agree to act in the relating to the proper and c	ce designated in this capacity. I furth omplete performants registered agent		ntment as registered of all statutes and accept the
	(Signa	iture)	SEC IVISIO 12 H
	\$ 100.00 \$ 25.00 \$ 30.00 \$ 5.00	Filing Fee for Application Designation of Registered Agent Certified Copy (optional) Certificate of Status (optional)	SECRETARY OF STATE VISION OF CORPORATE 2 HAY -9 AH 10: (

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, PLEXOR MARKETING 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 March 17, 2006, and is in good standing in this state.

THE SPECIAL SECTION OF SECTION OF

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on March 22, 2012.

ROSS MILLER Secretary of State

Electronic Certificate
Certificate Number: C20120322-1410
You may verify this electronic certificate
online at http://www.nvsos.gov/

Maria de la compansión de

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