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## **COVER LETTER**

TO: **Registration Section Division of Corporations** 

Business SUBJECT: 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:

Mitchell K Smith MBIZ Name of Person Firm/Company 800 FAIRWAY TR STE 320 Address DEGREFICICE Bench FL 37441 City/State and Zip Code <u>*B.Anyb.*z.Solutions</u>. Com E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mitcheis Smith Name of Person

at (<u>954</u>) <u>670-0858</u> Area Code & Daytime Telephone Number

MAILING ADDR Division of Corpora Registration Sectior P.O. Box 6327 Tallahassee, FL 323	itions Di Re Cli 14 26	<b>REET ADDRESS:</b> vision of Corporations gistration Section ifton Building 61 Executive Center Circle llahassee, FL 32301	ALLAHASSEE	12 HAY 29 AH	¥.
Enclosed is a check for t \$125.00 Filing Fee		S155.00 Filing Fee & Certified Copy	S160.00 Filing Fee, Certification of Status & Certified Copy		ı

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## 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:

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter 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.") 2. (Jurisdiction under the law of which foreign limited liability applicable) company is organized) 08/08/2011 5. (Duration: Year limited liability company will cease to Date of Organization) exist or "perperual") 6. (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) තිය 7. N  $\mathbf{r}$ (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: Helan Fairlass Delle 12 37441 Beach La. 10. Attached is an original contificate of existence, no more than 90 days old, duly authenticated by the official having 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 translation of the certificate under eath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: Lensulfing

Signature of a member or an authorized representative of a member. (In necordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

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, PLORIDA 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:

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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:

Mitcheic E Smith		
(Narrie)	12 H	
Florida Street Address (P.O. BOX NOT ACCEPTABLE)	ANAS ANAS	ي. • ن
Florida Street Address (P.O. Box <u>NOT</u> ACCEPTABLE)	6.23	
Deerfield Beach FL 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 gravity.

Signature

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



PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO MEREBY CERTIFY "ANY BUSINESS SOLUTIONS 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 FIRST DAY OF FEBRUARY, A.D. 2012.

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5014766 8300

120078791 You may verify this certificate online at corp.delaware.gov/authver.shtml

AUTHENTY CATION: 9334779

DATE: 02-01-12

OK per Gretchen



## FLORIDA DEPARTMENT OF STATE Division of Corporations

November 16, 2011

MITCHELL K. SMITH 800 FAIRWAY DRIVE SUITE 320 DEERFIELD BEACH, FL 33441

SUBJECT: ANY BUSINESS SOLUTIONS LLC Ref. Number: W11000053226

We have received your document for ANY BUSINESS SOLUTIONS LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The certificate of existence must be issued within the last 90 days by the Secretary of State which has custody of the records in the jurisdiction under the laws of which the above listed entity is incorporated/organized.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6028.

Barbara Bostick Regulatory Specialist II

Letter Number: 511A00026031