(Re	questor's Name)		
(Add	dress)		
(Add	dress)		
(Cit	y/State/Zip/Phone	e #)	
(0	,, o. a.	<i>,</i>	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nar	me)	
•	•	,	
(D0	cument Number)		
Certified Copies	_ Certificates	s of Status	
Special Instructions to I	Filing Officer:		

Office Use Only

G. MCLEOD

JUN 5 - 2012

**EXAMINER** 



000235227820

05/29/12--01001--005 \*\*78.75

06/05/12--01001--008 \*\*51.25

RECEIVED

#### **Bassett Consulting, LLC**

"Specializing in Regulatory Campliance & Registration"



May 25, 2012

Florida Dept. of State Division of Corporations 2661 Executive Center Circle Tallahassee, FL 32301

RE: Foreign Limited Liability Company Filling Rainmaker Consulting Services LLC

To Whom It May Concern:

Our company represents our client Rainmaker Consulting Services LLC in matters of state regulatory compliance.

Attached is a Foreign limited liability company filing and check for \$78.75 for the required filing fee and a certificate of status. This request comes through us from Laurence Sack, Managing Member and who can be contacted at (954) 696-6249.

Our company appreciates your expeditious service and assistance. You may contact me directly if you have any questions in this regard.

Bill Bassett

Senior Regulatory Consultant Director of Marketing & Development

Email: Bill@ConsultBassett.com

Fax: (850) 926-3155

Att.

#### **COVER LETTER**

TO:

New Filing Section
Division of Corporations

SUBJECT: RAINMAKER CONSULTING SERVICES LLC Name of corporation - must include suffix Dear Sir or Madam: The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida. Please return all correspondence concerning this matter to the following: LAURENCE SACK Name of Person LAURENCE SACK Firm/Company RAINMAKER CONSULTING SERVICES LLC Address 180 ISLE OF VENICE DR # 232 City/State and Zip code FORT LAUDERDALE FL 33301 E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: LAURENCE SACK at (954) 696-6249

Area Code & Daytime Telephone Number Name of Person STREET/COURIER ADDRESS: **MAILING ADDRESS:** New Filing Section **New Filing Section** Division of Corporations **Division of Corporations** Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301 Enclosed is a check for the following amount: \$78.75 Filing Fee & Certificate of Status \$70.00 Filing Fee \$78.75 Filing Fee & \$87.50 Filing Fee, Certificate of Status & Certified Copy 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. RAINMAKER CONSULTING SERVICES LLC

1.	RAINMAKER CONSUMENT OF THE PROPERTY OF THE PRO	JLTING SERVICES LLC	
	Name of Foreign Limited Liability Company; must inclu	ide "Limited Liability Company," "L.L.C.," or "LLC.")	
consent	e unavailable, enter alternate name adopted for the purpos of the managers or managing members adopting the alter ny," "L.L.C," "LLC.")	se of transacting business in Florida and attach a copy of the writte rnate name. The alternate name must include "Limited Liability	en
2	<b>DELAWARE</b>	3. N/A	
(Juris comp	DELAWARE  diction under the law of which foreign limited liability any is organized)	(FEI number, if applicable)	·
4.	5/18/2012	N/A  (Duration: Year limited liability company will cease to	
·· <u> </u>	5/18/2012 5 (Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")	
6.	N/A		
	(Date first transacted business in Flo (See sections 608.501 & 608.502 F.S.	orida, if prior to registration.) . to determine penalty (iability)	
7.	180 ISLE OF VENICE DR #232,	, FORT LAUDERDALE FL 33301 😹 🚅	
			<del></del>
<del></del>	(Street Address	of Principal Office)	12:00 to
8. 1f li	mited liability company is a manager-managed	(51)**\	7
9. The	e name and usual business addresses of the man	· · · · · · · · · · · · · · · · · · ·	- Cale
	LAURENCE SA		
	180 ISLE OF VENIC	E DR #232	
	FORT LAUDERDALE	E, FL 33301	
the juris translati	diction under the law of which it is organized. (A photocop on of the certificate under oath of the translator must be subr	days old, duly authenticated by the official having custody of records or is not acceptable. If the certificate is in a foreign language, a mitted.)  or promoted in Florida: CONSULTANCY SERVICES	in
	Lucia	ma -	
	Signature of a member of an au	uthorized representative of a member.	
	penalties of perjury that the facts stated herein are to document to the Department of State constitute	cution of this document constitutes an affirmation under the nue. I am aware that any false information submitted in a es a third degree felony as provided for in s.817.155, F.S.) ICE SACK	
		d name of signce	

## 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:			
RAINMAKER CONSULTING SERVICES 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:			
LAURENCE SACK			
(Name)			
180 ISLE OF VENICE DR #232			
Florida Street Address (P.O. Box NOT ACCEPTABLE)			
FORT LAUDERDALE FL 33301			
City/State/Zip			
llaving 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

\$ 30.00

\$ 5.00

Designation of Registered Agent

Certificate of Status (optional)

Certified Copy (optional)

# Delaware

PAGE 1

### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "RAINMAKER CONSULTING SERVICES 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 JUNE, A.D. 2012.

5156583 8300

120691330

Jeffrey W. Bullock, Secretary of Stal AUTHENTYCATION: 9612022

DATE: 06-01-12

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