(Requestor's Name)
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PICK-UP WAIT MAIL
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(Document Number)
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C. LEWIS AUG 15 2012 **EXAMINER** 

### CORPORATE ACCESS, INC.

"When you need ACCESS to the world"

236 East 6th Avenue . Tallahassee, Florida 32303 -- \*

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#### FLORIDA DEPARTMENT OF STATE Division of Corporations

August 8, 2012

CORPORATE ACCESS, INC ATTN: GLINDA

SUBJECT: STELLAR PARTNERS LLC

Ref. Number: W12000041456

We have received your document for STELLAR PARTNERS 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):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a foreign limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations. Therefore, the limited liability company must select an alternate name for use in the state of Florida. Also, please note that adding "of Florida" or "Florida" to the end of the name is not acceptable.

Please insert the alternate name in the space provided on the application form. You must also attach a copy of the written consent of the managers or managing members adopting the alternate name for Florida. For your convenience, we are enclosing a fill-in-the-blank form for you to complete and return to our office for processing.

The alternate name must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The word "Limited" may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC".

The document number of the name conflict is 299891.

Please return the corrected original and one copy of 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) 245-6051.

Carolyn Lewis Regulatory Specialist II Registration/Qualification Section

Letter Number: 212A00020521

## WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

We, the undersigned, do hereby certify that	we are the Managers and/or Managing
Members of Stellar Partners LLC	
(Name of Limited	Liability Company)
a limited liability company duly organized a	nd existing under the laws of
Delaware	SSET
(State or Country of Organization)	
Because the name of this foreign limited liab	pility company does not satisfy the
requirements of the s. 608,406, F.S., the limi	ited liability company hereby adopts the
following name to transact business in the st	ate of Florida:
Stellar Partners I LLC	ac of Fiorida.
(Name to be used by limited liability company in Florida, 1	NOTE: Name must end with Limited Liability
Company, L.L.C., or LLC.)	And the second s
Date: 8/13/2012	
Signature(s) of Manager(s) and/or Managing	; Member(s):
MUSKAN	Claudio Ballard, Manager_
•	
* .*	

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

STELLAR PARTNERS (Name of Foreign Limited Lin	_ · · ·	nde "Limited L	nability Commany		1177
STELLAR PARTNERS		,	, was a strict of the strict o		***************************************
(If name unavailable, enter alternate) consent of the managers or managing Company," "L.L.C.," "L.C."	name adopted for the purper i members adopting the alic	ise of transactir mate name. If	ig business in Ulo se alternate name	ride and attach must melude "I	a copy of the w Jimued Liability
<u>n</u> Delaware		3, 27-43470	058	*,	
(Junisdiction under the law of whice company is organized)	h foreign limited liability	***************************************	IFEI number, i	( applicable)	7 :
11/23/2010		5. PERPET	and the second s	•	•
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(Date fin ISoc serie	st transacted business in Floors 608,501 & 608,502 FS	arida, if prior to to determine p	o registration.) Senalty (tability)		
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If limited liability company	is á manager-managed	company, el	heck here 🔽		SEE SEE
. The name and usual busines	s addresses of the man	aging memb	ers or manager	s are as follo	ws:
CLAUDIO BALLARD		# 		• `	***************************************
• .	397				enterpe de terre de la constante de la constan
, 49 N FEDERAL HW #					
, 49 N FEDERAL HW # POMPANO BEACH.	FL 33062	erane arreiteanyen silgat sekert ar mesil Tayan			<del></del>

1 1 AMINATINE LEVERAGE

Signature of a member or an authorized representative of a member.

(h) accordance with section 608 408(3), F.S., the execution of this document constitutes an affirmation under the penalties of penalty that the facts simed herein are true 1 am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in \$.817.155, F.S.)

CLAUDIO BALLARD, MANAGER

VEHICLE

#### 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 PARTNERS LLC	
If unavailable, the alternate to be used in the state of Florida is:  5tc/lar Partner 5   LLC	
2. The name and the Florida street address of the registered agent and office are:	12 AUG SECHE TALLA
PARACORP INCORPORATED (Name)	- I
236 EAST 6TH AVENUE  Florida Street Address (P.O. Box NOT ACCEPTABLE)	# 9: 54 FF, FLORI
TALLAHASSEE FL 32303	P
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)

# Delaware

PAGE 1

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "STELLAR PARTNERS 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 THIRTY-FIRST DAY OF JULY, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "STELLAR PARTNERS LLC" WAS FORMED ON THE TWENTY-THIRD DAY OF NOVEMBER, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

4902625 8300

120891224

AUTHENT CATION: 9747957

DATE: 07-31-12

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