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Division of Corporations

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Foreign Limited Liability Company INVESTOR SERVICES, LLC

| Certificate of Status | 0 |
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Corporate Filing Menu

J. BRYAN

DCT 29 2012

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

| | OMPLIANCE WITH SECTION OF TED LIABILITY COMPANY TO TR | | | | TO REG | ISTER A I | OREIGN |
|----------------|--|--|---|--|------------------------|--------------|----------|
| 1 | | Investor Serv | | | | | |
| *· <u> </u> | (Name of Foreign Limited Lin | bility Company; must includ | e "Limited Clubit | ly Company," "L.L. | C.," or "I | LC.") | - |
| onse | one imavailable, enter alternate rent of the managers or managing pany," "L.L.C." "L.C.") | | | | | | |
| | Dolaware risdiction under the law of which mpany is organized) | 3. h foreign limited liability | (Pf | 90-0893802 El numbor, if applic | abie) | | - |
| 1. | 06/19/2012 | 5. | | Perpetual | | | |
| ** | (Date of Organization | | (Duration: Year exist or "perpet | limited liability co | mpany wi | il) cease to | _ |
| Š | | | | | | 1 = | 3 |
| | (Date firs (See sectio | t transacted business in Plori na 608.501 & 608.502 F.S. to | da, if prior to regi determine penal | stration.) y liability) | 7 | EOVE 1 | 200 |
| , _ | | 6365 Simmons Str | eet, Suite 145 | | | | <u> </u> |
| | | | | | | 25 C | 2 5 |
| _ | Las Ve | (Street Address of | NV | 890 | 31 | | |
| | limited liability company in the name and usual business Christopher Lalonds | | ing members o | ليسب | s follow | | M 8: 13 |
| | Kenneth Setzekorn | 6365 Simmons Street | , Suite 145 | Las Vegas | NV | 89031 | _ |
| _ | Edward A. Santos | 6365 Simmons Street | , Sulto 145 | Las Vegas | NV | 89031 | |
| e jur ansla | teched is an original certificate of isdiction under the law of which it iton of the certificate under cells of Nature of business or purpo Provide ser | is organized. (A photocopy is file translator must be submit | snot acceptable. If ted.) fromoted in Flo | the certificate is in a | | | cords in |
| | (In accordance with section population of perjury that | of a member or an auch on 608,408(3), F.S., the execution the facts stated hereto are true. riment of State constitutes a | on of this document I am aware that ar | constitutes an affirma ly false information | sion under submitte | d in a | |
| | · | | SANTOS | y we procedured 103 111 | . ,, . , , | -, | |
| | • | Typed or printed n | ame of signer | <u> </u> | | | |

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.

| | Investo | or Services, LLC | · · · · · · · · · · · · · · · · · · · | Malaka at a sagaran and a | |
|-------------------------|-------------------------------|------------------------------------|---------------------------------------|---|----------|
| If unavailable, the alt | emate to be used in the | state of Florida | is: | | |
| 2. The name and the | Florida street address of | f the registered t | agent and office are: | 2812 DCT SECIRE TALLAH | 71 |
| | CT 26 AHASSE | FI | | | |
| | 155 Q Florida Street Addre | office Plaza Drivess (P.O. Box NOT | | E.F.C.S.A. | |
| | Tallahassee | FI. | 32301 | RIDA I |) |

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)

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Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "INVESTOR 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 TWENTY-SIXTH DAY OF OCTOBER, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "INVESTOR SERVICES, LLC" WAS FORMED ON THE NINETEENTH DAY OF JUNE, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5172120 8300

121169905

You may varify this costificate coline at cosp.delaware.gov/authver.ghtml

AUTHENTY CATION: 9946229

DATE: 10-26-12

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