# M12000006391

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

Office Use Only



800241798248

11/15/12--01012--019 \*\*130.00

2912 NOV 15 AH & UZ

NOV 16 2012

#### **COVER LETTER**

	istration Section ision of Corporations					
SUBJECT:	ALTER	REST Name	TORATION, L	LLC.		
The enclosed Existence, an	l "Application by Foreign and check are submitted to a	Limited Liabilit egister the abov	y Company for Authorization e referenced foreign limited	n to Transact Business in Florid liability company to transact be	da," Certifi usiness in I	cate of Florida
Please return	all correspondence conce	rning this matter	to the following:			
	<i>M</i>	1. E. B	Name of Person		_	
	ALTER	REST	DRATION, LL	<b>4</b> .		
			Firm/Company		_	
	13785	WAL	SINGHAM R	o. #157	· ,	
			Address		2912	
	LARG	o, Fa		<u>ک</u>	₹ <b>3</b> 5	\$ ?
. 1					5	***************************************
	ALTE	RRESTO	PRATION RO	GMAIL COMPS ort notification)	納 8 02	<b>i</b> n ( )
				ort notification)	ි දිනි ව	t /
For further in	formation concerning this	matter, please o	all:	<b>&gt;</b>	N	
	M.E. Bos	CH	at ( 797 )  Area Code & Daytime Tele	599-196 <b>9</b>		
<del></del> -	Name of Per	son	Area Code & Daytime Tele	ephone Number	_ ,	
Divi Regi P.O.	ILING ADDRESS: sion of Corporations istration Section Box 6327 ahassee, FL 32314	D R C 20	TREET ADDRESS: ivision of Corporations egistration Section lifton Building 661 Executive Center Circle allahassee, FL 32301			
Enclosed is	a check for the follow	ving amount:				
	\$130 Filing Fee \$130	00 Filing Fee & ficate of Status	\$155.00 Filing Fee & Certified Copy	\$160.00 Filing Fee, Certifor of Status & Certified Cop		

#### 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 RUSINESS IN THE STATE OF FLORIDA:

nsent of the managers or managing members adopting the alte ompany," "L.L.C," "LLC.")	
	se of transacting business in Florida and attach a copy of the writtenate name. The alternate name must include "Limited Liability
STATE DP NEVADA  (Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)  (FEI number, if applicable)  (Duration: Year limited liability company will cease to exist or "nernetual")
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
APAIL 30, 2012 (Date of Organization)	PERPETUAL SAL
(Date of Organization)	exist of perpetual )
/D C	orida, if prior to registration.) to determine penalty liability)
(Date first transacted business in Flo (See sections 608.501 & 608.502 F.S.	to determine penalty liability)
ALTER RESTORATION	UC.
·	RO #159 (ARGO 62. 33774) of Principal Office)
The name and usual business addresses of the man.  M. E. (Mike) Bosch 11996	
JEM.	NSLE, PL. 33772
Attached is an original certificate of existence, no more than 90 of jurisdiction under the law of which it is organized. (A photocophalation of the certificate under oath of the translator must be subr	mitted.)
. Nature of business or purposes to be conducted or	promoted in Fibrida.
•	NION & RESTORATION
Signature of a member or an au (In accordance with section 608.408(3), F.S., the exec penalties of perjury that the facts stated herein are tru	thorized representative of a member.  The sum of this document constitutes an affirmation under the like I am aware that any false information submitted in a sa 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	Limited Liability Company	y is:			
ALTER	RESTORATION,	UC.			•
If unavailable, the a	alternate to be used in the st	ate of Florida is:			
ALTER	RESTORATION,	۷.۷.۵.			
2. The name and th	ne Florida street address of t	the registered agent and office are:			
	TALL TALL	2012			
		E Blossing R.  B (P.O. Box NOT ACCEPTABLE)	RETARY C AHASSEE	2012 NOV 15	
	SEMINDLE	FL 3377a City/State/Zip	OF STATE E. FLORIDA	料 8 02	C

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)

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, ALTER RESTORATION, 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 April 30, 2012, and is in good standing in this state.

SEAL OF THE

Electronic Certificate
Certificate Number: C20120516-1071
You may verify this electronic certificate
online at http://www.nvsos.gov/

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on May 16, 2012.

ROSS MILLER Secretary of State