

M12000006858

(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:

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11/27/12--01009--016 **160.00

12 DEC 10 AM 10:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

D. BRUCE
DEC. 11 2012
EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 28, 2012

DAVID HINCHMAN
745 NORTH MANNASOTA KEY
ENGLEWOOD, FL 34223

SUBJECT: EMPLOYEES VIDA DE FINCA LIMITED LIABILITY COMPANY
Ref. Number: W12000059348

We have received your document for EMPLOYEES VIDA DE FINCA LIMITED LIABILITY COMPANY and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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) 245-6051.

Deborah Bruce
Regulatory Specialist II

Letter Number: 512A00028343

APPROVED
AND
FILED
12 DEC 10 AM 10:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Employees Vida de Finca ^{Limited} Liability Company
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:

DAVID HINCHMAN

Name of Person

FARM OF LIFE (Costa Rica)

Firm/Company

745 ~~ROAD~~ NORTH MANNASOTA Key

Address

Englewood, FL 34223

City/State and Zip Code

jodycalvi@mac.com

E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

DAVID HINCHMAN

Name of Person

at (941) 525 3392

Area Code & Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☒ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12 DEC 10 AM 10:44

APPROVED
AND
FILED

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. Employees Vida de Finca Limited Liability Company
(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. Costa Rica 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 6/29/2009 5. Perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")

6. NONE yet
(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. David Hinchman, Farm of Life, 745 N Manasota Key
Englewood, FL 34223
(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:

Brian Calvi and Josephine Calvi
745 N MANASOTA Key
Englewood, FL 34223

10. Attached is an original certificate 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 oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: Hospitality
Reservation Service and Banking

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

(In accordance 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.)

BRIAN CALVI
Typed or printed name of signer

APPROVED
AND
FILED

12 DEC 10 AM 10:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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:

Employees Vida de Finca 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:

DAVID MINCHMAN

(Name)

745 N MANWASOTA Key

Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Englewood, FL 34223

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.

David L. Minchman

(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
TALLAHASSEE, FLORIDA

12 DEC 10 AM 10:44

APPROVED
AND
FILED

ABS Language Services - a division of Alliance Business Solutions, LLC



4811 D Trousdale Dr.
Nashville TN 37220, U.S.A
Off: 1.877.512.1195
Intl: 1.615.866.5542
Fax: 1.615.472.7924

CERTIFICATE OF ACCURATE TRANSLATION

I, Irina Albescu, being first duly sworn under oath, deposes and states that:
(Name of Translator - Printed)

1. I am fluent in both the Spanish and English languages; and
(Name of Language)
2. I have made the attached English translation from an annexed document and hereby certify that the same is a true, accurate, and complete translation to the best of my knowledge, ability, and belief.



Irina Albescu
Printed Name of Translator
[Signature]
Signature of Translator

NOTARY

Subscribed and sworn before me this

08 day of Nov, 2012.
(Day) (Month)

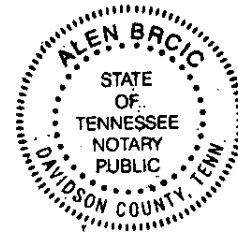
(Notary Public, State of Tennessee)

My Commission Expires:

01/07/2013

[Signature]

(Notary Public Signature)



My Commission Expires JAN. 7, 2013

<u>TRANSLATOR NAME:</u>	<u>LANGUAGE:</u>	<u>ADDRESS:</u>	<u>CONTACT:</u>
<u>Irina Albescu</u>	<u>Spanish</u>	ABS Language Services 4811 D Trousdale Dr, Nashville, TN 37220	Office: 1.877.512.1195 Email: info@abstranstate.com

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REPUBLIC OF COSTA RICA
MINISTRY OF FOREIGN AFFAIRS AND WORSHIP

APOSTILLE
(Convention de La Haye du 5 octobre 1961)

1. Country: Costa Rica

Code: AJARDIKMH7H

This public document

2. Has been signed by: Audelina Fabiola Varela Mata

3. Acting in the capacity of: Boss

4. Bears the seal/stamp of: National Registry of Property

Certified

5. At: San José, Costa Rica

6. On: 10/25/2012

7. By: [Illegible] Sandoval Arce Ministry of Foreign Affairs: Authentication Officer of
MREC

8. License Number: 51317

9. Seal: [seal]

10. Signature: [signature]

Name of the [illegible]: EMPLOYEES VIDA DE FINCA LIABILITY COMPANY

Type of document: Certificates of documents

Number of pages: 4

This apostille/legalization only certifies the signature, the capacity of the signers and the seal or stamps it bears. It does not certify the content of the document for which it was issued.

The authenticity of this apostille/legalization may be verified at:
[http://www.\[illegible\].go.cr](http://www.[illegible].go.cr)

REGISTRO NACIONAL



REPÚBLICA DE COSTA RICA
MINISTERIO DE RELACIONES EXTERIORES Y CULTO

APOSTILLE

(Convention de La Haye du 5 octobre 1961)

1. País: Costa Rica
(Country - Pays)

Código: AJRD710M7H
(Code - Code)

El presente documento público
(This public document - Le présent acte public)

2. Ha sido firmado por: Aurelio Fabrice Varela Mora
(Has been signed by - A été signé par)

3. Actuando en calidad de: Jefe
(Acting in the capacity of - Agissant en qualité de)

4. Lleva el sello o sello de: Registro Nacional de la Propiedad
(Bears the seal or seal of - Est porte le sceau de)

Certificado
(Certified - Attesté)

5. En: San José, Costa Rica
(At - A)

6. El: 25/10/2012
(On - Le)

7. Por: Ana Sofía Arce Ojeda, Oficial de Asesorías del MREC
(By - Par: Mécène / of Foreign Affairs - Mécène des Affaires Étrangères)

8. No: 81317
(Number - Numéro)

9. Sello:
(Seal - Sceau)

10. Firma:
(Signature - Signature)

Nombre del acto: EMPLÉADOS Y/O DE FINCA SOCIEDAD DE RESPONSABILIDAD
(Name of the act - Nom de l'acte)

Tipo de documento: Certificaciones de Documentos
(Type of document - Type de document)

Número de hojas o advertencias: 4
(Number of pages - Nombre de pages)

Esta apostilla / legalización solo
certifica la autenticidad de la
firma, la capacidad del
signatario y el sello o timbre
que ostenta. Esta no certifica el
contenido del documento para el
cual se emite.

This apostille / legalization only
certifies the signature, the
capacity of the signer and the
seal or stamp it bears. It does
not certify the content of the
document for which it was
issued.

Cette apostille / legalization ne
certifie que la signature, la
qualité en laquelle le signataire
de l'acte agit, et le sceau ou
timbre dont cet acte est revêtu.
Elle ne certifie pas le contenu du
document pour lequel elle a été
émise.

La autenticidad de esta apostilla / legalización puede ser verificada en: The authenticity of this
apostille / legalization may be verified at: L'authenticité de cette apostille / legalization peut être
vérifiée en: <http://www.mrec.go.cr>

JUAN CARLOS SANDOVAL VEGAR
DIRECCIÓN GENERAL DE REGISTRO NACIONAL



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Irina Albescu
Printed Name of Translator

[Signature]
Signature of Translator

NOTARY

Subscribed and sworn before me this

08 day of Nov, 2012.
(Day) (Month)

(Notary Public, State of Tennessee)

My Commission Expires: 01/07/2013

[Signature]
(Notary Public Signature)



My Commission Expires JAN. 7, 2013

TRANSLATOR NAME:	LANGUAGE:	ADDRESS:	CONTACT:
<u>Irina Albescu</u>	<u>Spanish</u>	ABS Language Services 4811 D Trousdale Dr, Nashville, TN 37220	Office: 1.877.512.1195 Email: info@abstranlate.com

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NATIONAL REGISTRY

Ba. Audelina Fabiola Varela Mata
Coordinator of the Regional Office Sector West
Management of Registry Services

Certifies

That the preceding signature of the civil clerk **Marlene Arce Fallas** is true.

This is issued in October 23rd 2012.

San José, Costa Rica.

[Signature and stamp]

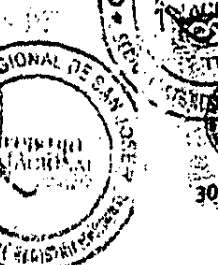
ACION

REGISTRO NACIONAL

Licenciada Audelina Fabiola Varela Mata
Coordinadora Sede Regional Sector Oeste
Dirección de Servicios Registrales

Certifica:

Que la firma que antecede de la funcionaria: **Marlene Arce Fallas** es auténtica. Se expide la presente a los veintitrés días del mes de Octubre de 2012. San José, Costa Rica.



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Irina Albescu
Printed Name of Translator

[Signature]
Signature of Translator

NOTARY

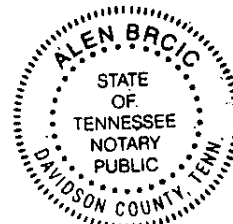
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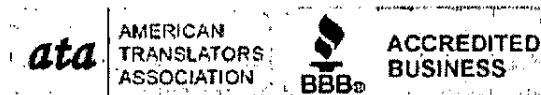
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My Commission Expires JAN. 7. 2013

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REPUBLIC OF COSTA RICA
NATIONAL REGISTRY
LITERAL CERTIFICATION
CERTIFICATION NUMBER: *-4163425-2012*-
LEGAL ENTITY: 3-102-540270

No. 869136

GENERAL DATA

REGISTERED NAME: EMPLOYEES VIDA DE FINCA LIABILITY COMPANY

CURRENT STATUS: REGISTERED

SOURCE DOCUMENT: VOLUME 576, RECORD 43620 DATE OF REGISTRATION/TRANSFERRAL:
07/07/2008

ADDRESS: SAN JOSÉ – SAN JOSÉ ROHRMOSER, 200 NORTH OF THE PARQUE DE LA AMISTAD,
TWO-STOREY BUILDING ON THE LEFT, COLOR: MUSTARD.

OBJECTIVE/AIMS (SUMMARY): MAINLY THE REAL ESTATE, APART FROM ITS TRADE AND
EXPLOITATION IN ANY WAY. GRANTING DEPOSITS AND GUARANTEES IN FAVOUR OF
MEMBERS OR THIRD PARTIES. CREATING TRUSTS AS A TRUSTEE, FIDUCIARY OR
FIDEICOMMISSARY.

DEADLINE OF THE CORPORATE BODY: BEGINNING: 06/25/2008, EXPIRATION: 06/25/2107

ESTABLISHMENT OF CAPITAL OR PATRIMONY

DATE OF REGISTER: 06/29/2009 **TYPE OF CAPITAL:** SUBSCRIBED AND PAID-IN **TYPE OF
CURRENCY:** COLONES

CLASS OF SHARE OR TITLE: INSTALMENT

NUMBER OF TITLES: 2; **AMOUNT:** 5, 000.00; **TOTAL:** 10,000.00

THERE ARE NO MORE REGISTRIES OF CAPITAL/PATRIMONY FOR THE LEGAL ENTITY

ADMINISTRATION

DEADLINE FOR MANAGERS AND/OR EXTENSIONS: BOTH MANAGERS AND THE REGISTERED
AGENT WILL STAY IN THEIR POSTS FOR THE WHOLE TERM.

REPRESENTATION

*THE JUDICIAL AND EXTRAJUDICIAL REPRESENTATION WILL CORRESPOND TO BOTH
MANAGERS, WITH CAPACITY OF GENERAL ATTORNEY-IN-FACT WITH NO AMOUNT LIMIT,
ACTING AS A WHOLE IN ACCORDANCE WITH ARTICLE 1253 OF THE CIVIL CODE. ACTING EITHER
AS A WHOLE OR INDIVIDUALLY, THEY WILL BE ABLE TO SUBSTITUTE AND GRANT ALL KIND OF
POWERS, REVOKE SUBSTITUTIONS AND POWERS AND GRANT AND CREATE OTHERS AGAIN,
WITHOUT LOSING THEIR FACULTIES FOR THIS REASON.

APPOINTMENTS

DATE OF REGISTER: 06/29/2009 **POST:** MANAGER

HELD BY: BRIAN CALVI **PASSPORT:** 472509521

REPRESENTATION: JUDICIAL AND EXTRAJUDICIAL REPRESENTATION

VALIDITY: BEGINNING 05/20/2009; EXPIRATION 06/25/2107

DATE OF REGISTER: 06/29/2009 **POST:** MANAGER

HELD BY: JOSEPHINE HINCHMAN CALVI **PASSPORT:** 425074489

REPRESENTATION: JUDICIAL AND EXTRAJUDICIAL REPRESENTATION

VALIDITY: BEGINNING 05/20/2009; EXPIRATION 06/25/2107

DATE OF REGISTER: 06/29/2009 **POST:** REGISTERED AGENT

HELD BY: GONZALO VIQUEZ CARAZO **ID:** 1-0931-0662

REPRESENTATION: NOT APPLICABLE

VALIDITY: BEGINNING 05/20/2009; EXPIRATION 06/25/2107

ADDRESS: SAN JOSÉ ROHRMOSER, 200 NORTH OF THE PARQUE DE LA AMISTAD, VIQUEZ
OREAMUNO AND MEMBERS

END OF APPOINTMENTS OR POSTS OF THE LEGAL ENTITY

THERE IS NO INFORMATION ABOUT POWERS GRANTED BY THE LEGAL ENTITY

THERE IS NO INFORMATION ABOUT IMPACTS ON THE LEGAL ENTITY

THERE IS NO INFORMATION OF PENDING TRANSACTIONS ON THE LEGAL ENTITY

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Irina Albescu
Printed Name of Translator

[Signature]
Signature of Translator

NOTARY

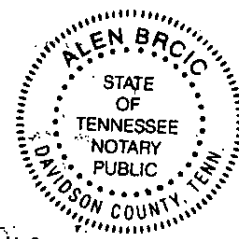
Subscribed and sworn before me this

08 day of Nov, 2012.
(Day) (Month)

(Notary Public, State of Tennessee)

My Commission Expires: 01/07/2013

[Signature]
(Notary Public Signature)



My Commission Expires JAN. 7, 2013

TRANSLATOR NAME:	LANGUAGE:	ADDRESS:	CONTACT:
<u>Irina Albescu</u>	<u>Spanish</u>	ABS Language Services 4811 D Trousdale Dr. Nashville, TN 37220	Office: 1.877.512.1195 Email: info@abstranstate.com

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REPUBLICA DE COSTA RICA
REGISTRO NACIONAL
CERTIFICACIÓN LITERAL

Nº 869136

NUMERO DE CERTIFICACION: *-4163425-2012*-
PERSONA JURIDICA: 3-102-540270

REGISTRO NACIONAL
REPUBLICA DE COSTA RICA

DATOS GENERALES

RAZON SOCIAL O DENOMINACION: EMPLEADOS VIDA DE FINCA SOCIEDAD DE RESPONSABILIDAD LIMITADA
ESTADO ACTUAL: INSCRITA
DOCUMENTO ORIGEN: TOMO: 576 ASIENTO: 43620 **FECHA INSCRIPCION / TRASLADO:** 07/07/2008
DOMICILIO: SAN JOSE- SAN JOSÉ: ROHRMOSER, 200 NORTE DEL PARQUE DE LA AMISTAD, EDIFICIO DE DOS PLANTAS A MANO IZQUIERDA, COLOR MOSTAZA.
OBJETO/FINES (SINTESIS): PRINCIPALMENTE LOS BIENES RAICES, ADEMAS DEL COMERCIO Y LA EXPLOTACION DE EL EN TODAS SUS FORMAS. OTORGAR FIANZAS Y GARANTIAS A FAVOR DE SOCIOS Y/O TERCEROS. CONSTITUIR FIDEICOMISOS SEA COMO FIDEICOMITENTE, FIDUCIARIO O FIDEICOMISARIO.
PLAZO DE LA ENTIDAD JURIDICA: INICIO: 25/05/2008 VENCIMIENTO: 25/06/2107

CONFORMACION DEL CAPITAL O PATRIMONIO

FECHA DE INSCRIPCION: 29/06/2008 **TIPO DE CAPITAL:** SUSCRITO Y PAGADO **TIPO DE MONEDA:** COLONES
CLASE DE ACCION O TITULO: CUOTAS
CANTIDAD TITULOS: 2 **MONTO:** 5,000.00 **TOTAL:** 10,000.00

NO EXISTEN MAS REGISTROS DE CAPITAL/PATRIMONIO PARA LA PERSONA JURIDICA

ADMINISTRACION

PLAZO DE DIRECTORES Y/O PROPRIOGAS: LOS DOS GERENTES Y EL AGENTE RESIDENTE DURARAN EN SUS CARGOS POR TODO EL PLAZO SOCIAL.

REPRESENTACION

*LA REPRESENTACION JUDICIAL Y EXTRAJUDICIAL CORRESPONDERA A LOS DOS GERENTES CON FACULTADES DE APODERADOS GENERALISIMOS SIN LIMITE DE SUMA, ACTUANDO CONJUNTAMENTE, SEGUN EL ARTICULO 1253 DEL CODIGO CIVIL, ACTUANDO CONJUNTA O SEPARADAMENTE, PODRAN SUSTITUIR Y OTORGAR TODA CLASE DE PODERES, REVOCAR SUSTITUCIONES Y PODERES Y CONFERIR Y HACER OTRAS DE NUEVO, SIN PERDER POR ELLO SUS FACULTADES.

NOMBRAMIENTOS

FECHA DE INSCRIPCION: 29/06/2008 **CARGO:** GERENTE
OCUPADO POR: BRIAN CALVI PASAPORTE 472509521
REPRESENTACION: REPRESENTACION JUDICIAL Y EXTRAJUDICIAL
VIGENCIA: INICIO 20/05/2009 VENCIMIENTO 25/06/2107

FECHA DE INSCRIPCION: 29/06/2008 **CARGO:** GERENTE
OCUPADO POR: JOSEPHINE HITCHMAN CALVI PASAPORTE 425074489
REPRESENTACION: REPRESENTACION JUDICIAL Y EXTRAJUDICIAL
VIGENCIA: INICIO 20/05/2009 VENCIMIENTO 25/06/2107

FECHA DE INSCRIPCION: 29/06/2008 **CARGO:** AGENTE RESIDENTE
OCUPADO POR: GONZALO VIQUEZ CARAZO CEDULA DE IDENTIDAD 1-0931-0662
REPRESENTACION: NO APLICA
VIGENCIA: INICIO 20/05/2009 VENCIMIENTO 26/05/2107
DIRECCION: SAN JOSE, ROHRMOSEI, 200 NORTE DEL PARQUE DE LA AMISTAD, VIQUEZ OREAMUNO Y ASOCIADOS.

FIN DE LOS NOMBRAMIENTOS O CARGOS DE LA PERSONA JURIDICA
NO EXISTE INFORMACION DE PODERES OTORGADOS POR LA PERSONA JURIDICA
NO EXISTE INFORMACION DE AFECCIONES SOBRE LA PERSONA JURIDICA
NO EXISTE INFORMACION DE MOVIMIENTOS PENDIENTES SOBRE LA PERSONA JURIDICA

No. 869137

[Emblem]

THERE IS NO INFORMATION ABOUT OBSERVATIONS REGARDING THE LEGAL ENTITY

THIS CERTIFICATE IS A PUBLIC DOCUMENT IN ACCORDANCE WITH ARTICLE 71 OF EXECUTIVE DECREE NUMBER 26771-J OF MARCH 18TH 1998 AND ARTICLE 369 OF THE PROCEDURE CODE.

NATIONAL REGISTRY, 11:42:43 PM OF OCTOBER 23RD 2012.

[Signature]

SIGNATURE OF AUTHORIZED CLERK

MARLENE ARCE FALLAS

[Stamp of the National Registry]

NOT VALID WITHOUT STAMP DUTIES CANCELLED IN ATTACHED FORM AND ITS CORRESPONDING SEALS.

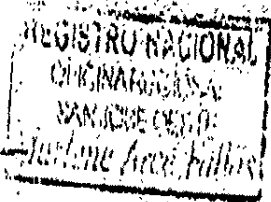


NO EXISTE INFORMACION DE OBSERVACIONES SOBRE LA PERSONA JURIDICA N° 889137

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(Notary Public, State of Tennessee)
My Commission Expires: 01/07/2013

Beric Allen



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