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CR2E027 (9/10)

COVER LETTER

	gistration Section ision of Corporations						
SUBJECT: Wraps1.Com, LLC Name of Limited Liability Company							
Please return all correspondence concerning this matter to the following:							
	Burton Cole						
Name of Person							
	Wraps1.Com						
		Firm/Company					
6229 Fort Worth Ave							
		Address					
Odessa, TX 79762							
		City/State and Zip Code	,				
accounts@wraps1.com							
E-mail address: (to be used for future annual report notification)							
For further in	nformation concerning this matter, ple	lease call:					
В	urton Cole	_{at} 310 5982272					
_	Name of Person	Area Code & Daytime Telephone Number					
Diy Reg P.C	ision of Corporations gistration Section b. Box 6327 lahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301					
	s a check for the following amo \$125.00 Filing Fee \$130.00 Fili Certificate of	iling Fee & 🔲 \$155.00 Filing Fee & 🔲 \$160.00 Filing Fee, Cer					

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

IN COMPLIANCE WITH SECTION 608 503 FLORIDA STATLITES. THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN	THE STATE OF FLORIDA:
1. Wraps1.Com, LLC (Name of Foreign Limited Liability Company; must in	clude "Limited Liability Company," "L.L.C.," or "LLC.")
	rpose of transacting business in Florida and attach a copy of the written alternate name. The alternate name must include "Limited Liability
_{2.} Texas	_{3.} 45-5491880
(Jurisdiction under the law of which foreign limited liability company is organized)	y (FEI number, if applicable)
_{4.} June 13, 2012	_{5.} perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6. NA	
(Date first transacted business in (See sections 608.501 & 608.502 l	Florida, if prior to registration.) F.S. to determine penalty liability)
7. 6229 Fort Worth Ave	ઇ 존개
Odessa, TX 79762	EB HELL
(Street Addr	ess of Principal Office)
8. If limited liability company is a manager-manag	ged company, check here
9. The name and usual business addresses of the m	Name of the second seco
Burton Cole. 6229 Fort Worth Ave	e., Odessa, TX 79762
	n 90 days old, duly authenticated by the official having custody of records in
the jurisdiction under the law of which it is organized. (A photo translation of the certificate under oath of the translator must be	ocopy is not acceptable. If the certificate is in a foreign language, a
11. Nature of business or purposes to be conducted	d or promoted in Florida:
- Du	
Signature of a member or an	authorized representative of a member.
	execution of this document constitutes an affirmation under the e true. I am aware that any false information submitted in a
	utes a third degree felony as provided for in s.817.155, F.S.)

Typed or printed name of signee

Burton Cole

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: Wraps1.Com, LLC				
If unavailable, the alto	ernate to be used in the sta	ate of Florida is:		
2. The name and the	Florida street address of t	he registered agent and office are:		
Bu	rl Cole			
		(Name)	··············	
36	3672 SW Conibear			
	Florida Street Address (P.O. Box NOT ACCEPTABLE)			
Po	rt St. Lucie	_{FL} 34953		
		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)

SEGRETARY OF STATE
BIVESON OF CORPURATIONS

Corporations Section
P.O.Box 13697
Austin, Texas 78711-3697



Office of the Secretary of State

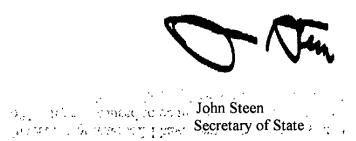
Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Wraps1.com LLC (file number 801611290), a Domestic Limited Liability Company (LLC), was filed in this office on June 13, 2012.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on February 01, 2013.





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Fax: (512) 463-5709