# M13000000816

(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	me)
(Do	ocument Number)	1
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

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SECRETARY OF STATE
ALLAHASSEE, FLORIDI



## FLORIDA DEPARTMENT OF STATE Division of Corporations

January 3, 2013

PATRICIA MILLER INTERNATIONAL MANAGEMENT ASSOC, LLC 9090 THE LANE NAPLES, FL 34109

SUBJECT: INTERNATIONAL MANAGEMENT ASSOC, LLC

Ref. Number: W1300000455



We have received your document for INTERNATIONAL MANAGEMENT ASSOC, 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):

In addition to the application, you must submit a CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING from the Nevada Secretary of State's office. The certificate must be dated within the past 90 days.

An example of this certificate is enclosed.

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.

Buck Kohr Regulatory Specialist II

Letter Number: 313A00000132

## **COVER LETTER**

TO: Registration Section
Division of Corporations
SUBJECT: INTERNATIONAL Management ASSO LLA Name of Limited Ciability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Cartificate 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:
PATRICIA MILLE
Name of Person
International management Ass LH
Firm/Company
9090 The Lane
Address
naples , Fl 34109
City/State and Zip Code
Patty C Dyster house established to Com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
ror ruller information concerning this matter, please can.
Hattuu Mullu at (239 ) 695-0956  Name of Person Area Code & Daytime Telephone Number
Name of Person Area Code & Daytime Telephone Number
MAILING ADDRESS: STREET ADDRESS:
Division of Corporations  Registration Section  Division of Corporations  Registration Section
P.O. Box 6327 Clifton Building
Tallahassee, FL 32314  2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\Boxed{\sigma}\$130.00 Filing Fee & \$\Boxed{\sigma}\$155.00 Filing Fee & \$\Boxed{\sigma}\$160.00 Filing Fee, Certificate \cdot \cord

# 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 FOREIG
LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," C.L.C., "C.L.C.," C.L.C.," C.L.C., "C.L.C.," C.L.C.," C.L.C., "C.L.C.," C.L.C., "C.L.C.," C.L.C., "C.L.C.," C.L.C.," C.L.C., "C.L.C.," C.L.C., "C.L.C.," C.L.C., "C.L.C.," C.L.C.," C.L.C., "C.L.C.," C.L.C.," C.L.C., "C.L.C.," C.L.C., "C.L.C.," C.L.C.," C.L.C., "C.L.C.," C.L.C.," C.L.C., "C.L.C.," C.L.C.," C.L.C., "C.L.C.," C.L.C.," C.L.C.
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach acopy of the written
consent of the managers or managing members adopting the alternate name. The alternate name must include "Lighted Liability Company," "L.L.C," "LLC.")
2 Nevada 3 45-5077549 6 2
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4 8/3/2011 5 per petterl
(Date of Organization) (Dufation: Year limited liability company will cease to exist or "perpetual")
6.   1/1/20/2
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7
9090 the Lane Naples . Fl 34109
(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:
TATRICIA MILLER 9090 The Lane Maples,
91 2110a
4 24/07
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records
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: MMMGMMX by
Sales Marketina Gunds
Jatrilia Milla
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.)
TATRICIA MILLER
Typed or printed name of signee

## 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:	
International Management Assoc	4C
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:	
. 50	
Hatricia Milli	
(Name)	
9090 The Lane	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Maples FL 34109	
/ 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)

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, INTERNATIONAL MANAGEMENT ASSOCIATES, 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 August 3, 2011, and is in good standing in this state.

SEAL OF THE OP

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on January 30, 2013.

ROSS MILLER Secretary of State

Electronic Certificate
Certificate Number: C20130130-2248
You may verify this electronic certificate
online at http://www.nvsos.gov/

## INTERNATIONAL MANAGEMENT ASSOCIATES, LLC

## Business Entity Information

Status:	Active	File Date:	8/3/2011
Type:	Domestic Limited-Liability Company	Entity Number:	E0441102011-2
Qualifying State:	NV	List of Officers Due:	8/31/2013
Managed By:	Managers	Expiration Date:	
NV Business ID:	NV20111513117	Business License Exp:	8/31/2013

## **Registered Agent Information**

Name:	LAUGHLIN ASSOCIATES, INC.	Address 1:	9120 DOUBLE DIAMOND PKWY
Address 2:		City:	RENO
State:	NV	Zip Code:	89521
Phone:		Fax:	
Mailing Address 1:		Mailing Address 2:	
Mailing City:		Mailing State:	NV
Mailing Zip Code:			
Agent Type:	Commercial Registered Age	nt - Corporation	
Jurisdiction:	NEVADA	Status:	Active

### **Officers**

## □ Include Inactive Officers

Manager - Bl	RENT BUSCAY		
Address 1:	2533 N CARSON STREET	Address 2:	
City:	CARSON CITY	State:	NV
Zip Code:	89706	Country:	USA
Status:	Active	Email:	
Manager - PA	ATRICIA M MILLER		
Address 1:	9090 THE LANE	Address 2:	
City:	NAPLES	State:	FL
Zip Code:	34109	Country:	USA
Status:	Active	Email:	

#### Actions\Amendments

Action Type:	Articles of Organization					
Document Number:	20110577405-52	# of Pages:	3			

File Date:	8/3/2011	Effective Date:		
(No notes for this act	tion)			
Action Type:	Initial List			
Document Number:	20110622816-99	# of Pages:	1	
File Date:	8/25/2011	Effective Date:		
(No notes for this act	tion)			
Action Type:	Annual List			
Document Number:	20120801212-19	# of Pages:	1	,
File Date:	11/28/2012	Effective Date:		•
(No notes for this act	tion)			

12/10/2012 2:20 P