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COVER LETTER,

	Registration Section Division of Corporations				
~	7EFS of Boca Ra				
SUBJEC	71:	Name of Limited Liability Company			
				ansact Business in Florida," Certificate or y company to transact business in Florida	
Please ret	turn all correspondence cor	ncerning this matter to the	following:	跨島市	
	Paul Redclift			题87	
		Na	me of Person	82 P	
	7EFS of Boca Raton LLC				
		Fir	m/Company	8	
	2000 Las Cas	as Rd		7	
			Address		
	Boca Raton, FL 33486				
		City/Sta	ate and Zip Code		
	paulredclift@a	ol.com			
	Е	-mail address: (to be used	for future annual report not	fication)	
For further	er information concerning t	his matter, please call:			
	Paul Redclift		561 289-4	1042	
-	Name of	Person Area	Code & Daytime Telephon	e Number	
]	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	Division Registra Clifton 2661 Ex	T ADDRESS: n of Corporations ation Section Building xecutive Center Circle ssee, FL 32301		
	ed is a check for the fold \$125.00 Filing Fee ■	llowing amount: 3 \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filing Fee & Certified Copy	■ \$160.00 Filing Fee, Certificate of Status & Certified Copy	

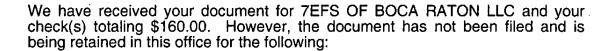


February 15, 2013

PAUL REDCLIFT 7EFS OF BOCA RATON LLC 2000 LAS CASAS RD BOCA RATON, FL 33486

SUBJECT: 7EFS OF BOCA RATON LLC

Ref. Number: W13000009527



A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Joey Bryan Regulatory Specialist II

Letter Number: 613A00003818

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

COMPLLANCE WELL SECTION (60 CD) ELODIDA STATLITES THE EQUI OWING IS SUBMITTED TO DECISTED A EQUEICN

(Name of Foreign Limited Liability Company; must inc	clude "Limited Liability Company," "L.L.C.," or "LLC.")
	pose of transacting business in Florida and attach a copy of the written ternate name. The alternate name must include "Limited Liability
Indiana	3. (FEI number, if applicable)
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
12/05/2012	perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
	4.8
(Date first transacted business in I (See sections 608.501 & 608.502 F	Florida, if prior to registration.) .S. to determine penalty liability)
2000 E 116th St #103	932
Carmel, IN 46032	原名 圣 〇
(Street Addre	ess of Principal Office)
. If limited liability company is a manager-manage	ed company, check here
The name and usual business addresses of the ma	anaging members or managers are as follows:
Paul Redclift, 2000 Las Casas Rd; Boca Ra	
	aton, FL 33486
Paul Redclift, 2000 Las Casas Rd; Boca Ra	aton, FL 33486
Paul Redclift, 2000 Las Casas Rd; Boca Ra	aton, FL 33486
Paul Redclift, 2000 Las Casas Rd; Boca Ra Steve Neilson, 2000 E 116th St. #103, Carn O. Attached is an original certificate of existence, no more than e jurisdiction under the law of which it is organized. (A photoc	mel, IN 46032 90 days old, duly authenticated by the official having custody of records i copy is not acceptable. If the certificate is in a foreign language, a
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Paul Redclift, 2000 Las Casas Rd; Boca Ra Steve Neilson, 2000 E 116th St. #103, Carr Attached is an original certificate of existence, no more than to ejurisdiction under the law of which it is organized. (A photoconslation of the certificate under oath of the translator must be so. Nature of business or purposes to be conducted Signature of a member or an analysis of perjury that the facts stated herein are	aton, FL 33486 mel, IN 46032 90 days old, duly authenticated by the official having custody of records copy is not acceptable. If the certificate is in a foreign language, a submitted.) or promoted in Florida: TE Fit Spa licensee, an arts authorized representative of a member. secution of this document constitutes an affirmation under the true. I am aware that any false information submitted in a tes 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 o	f the Limited Liability Compa Raton LLC	pany is:	
If unavailable,	the alternate to be used in th	ne state of Florida is:	
2. The name a	nd the Florida street address	s of the registered agent and office	are:
	Paul Redclift		體量力
		(Name)	通识声
	2000 Las Casas Rd		
	Florida Street Ac	ddress (P.O. Box NOT ACCEPTABLE)	Za v
	Boca Raton	33486 FL	DATE S
		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)

STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

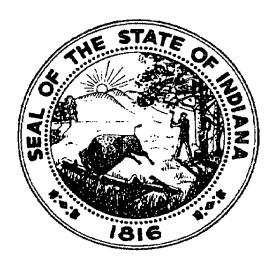
I, CONNIE LAWSON, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

7EFS OF BOCA RATON LLC

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on December 05, 2012, and was in existence or authorized to transact business in the State of Indiana on February 28, 2013.

I further certify this Domestic Limited Liability Company (LLC) has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the City of Indianapolis, this Twenty-Eighth Day of February, 2013.

Corrie Lawson

CONNIE LAWSON, Secretary of State

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