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SECRETARY OF STALE

B. BOSTICK
MAY - 2 2013
EXAMINER

CR2E027 (9/

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT: Stark Service Solutions CLC

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:
Naomi L. Stark
Name of Person
Stark Service Solutions, LLC
Po Box 772440 Address
Orlando FL 32877 City/State and Zip Code
nstark a Starkservice solutions. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person Area Code & Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section STREET ADDRESS: 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 □ \$130.00 Filing Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate Certificate of Status Certified Copy of Status & Certified Copy

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
1. Stark Service Solutions, LLC
(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. Ari 20na (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)
company is organized) Therpetual Therpetual
(Date of Organization) (Duration: Year limited liability company will rease to exist or "perpetual")
6.
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 1353 & Lanner Dr. / DD BOX 772440 Orlandof
Orlando F2 32877 3287
(Street Address of rincipal 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:
Masmi Stark (13532 Lanner Dr. Orlando FC 328.27)
4 OD BACAD MUCO
1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
1 Orlando + L 32877
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
Consulting i training
Man I All
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.)
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 Lin Stark Servi	ce Solutions, LLC	
If unavailable, the alternate to l	be used in the state of Florida is:	
	reet address of the registered agent and office are:	
Maomi	Stark (Name) PS = = = = = = = = = = = = = = = = = = =	
	(Name) ALCO ALCO ALCO ALCO ALCO ALCO ALCO ALC	
Orland	الم	
Having been named as registere	City/State/Zip	
liability company at the place d	esignated in this certificate, I hereby accept the appointment as ct 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 **Designation of Registered Agent** \$ 25.00 **Certified Copy (optional)** \$ 30.00 Certificate of Status (optional) 5.00





STATE OF ARIZONA



Office of the **CORPORATION COMMISSION**

CERTIFICATE OF GOOD STANDING

To all to whom these presents shall come, greeting:

I, Jodi A. Jerich, Executive Director of the Arizona Corporation Commission, do hereby certify that

***STARK SERVICE SOLUTIONS. L.L.C. ***

a domestic limited liability company organized under the laws of the State of Arizona, did organize on the 28th day of July 2006.

I further certify that according to the records of the Arizona Corporation Commission, as of the date set forth hereunder, the said limited liability company is not administratively dissolved for failure to comply with the provisions of A.R.S. section 29-601 et seq., the Arizona Limited Liability Company Act; and that the said limited liability company has not filed Articles of Termination as of the date of this certificate.

This certificate relates only to the legal existence of the above named entity as of the date issued. This certificate is not to be construed as an endorsement, recommendation, or notice of approval of the entity's condition or business activities and practices.

> IN WITNESS WHEREOF, I have hereunto set my hand and affixed the official seal of the Arizona Corporation Commission. Done at Phoenix, the Capital, this 29th Day of April, 2013, A. D.



903805



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 23, 2013

NAOMI L. STARK POST OFFICE BOX 772440 ORLANDO, FL 32877

SUBJECT: STARK SERVICE SOLUTIONS, LLC

Ref. Number: W13000023733

We have received your document for STARK SERVICE SOLUTIONS, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

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.

Barbara Bostick Regulatory Specialist II

Letter Number: 613A00009732