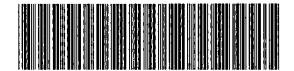
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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
MAY - 3 201 <b>3</b>
A. LUNT

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FILED

CR2E027 (9/10)

### **COVER LETTER**

**TO:** Registration Section Division of Corporations

SUBJECT: Cyboarg Enterprises LLC

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:

# Diane Kalinowski Name of Person MyLLC.com, Inc. Firm/Company 5716 Corsa Ave. Ste 110 Address Westlake Village, CA 91362 City/State and Zip Code diane.kalinowski@myllc.com E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

# Diane Kalinowski

<sub>47</sub>888 \ 886-9552

Name of Person

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

# 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 LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	Cyboarg Enterprises LLC (Name of Foreign Limited Liability Company; must inc	clude	e "Limited Liability Company," "L.L.C.," or "LLC.")
cor	name unavailable, enter alternate name adopted for the pur	pose	e of transacting business in Florida and attach a copy of the write name. The alternate name must include "Limited Liability
	California	•	95-4869344
	Jurisdiction under the law of which foreign limited liability ompany is organized)	3. y	(FEI number, if applicable)
4.	06/04/2001	5.	Perpetual
7.	(Date of Organization)	٥.	Perpetual  (Duration: Year limited liability company will cease to exist or "perpetual")
6.			istration
	(Date first transacted business in (See sections 608.501 & 608.502 F	Florid S. to	o determine penalty liability)
7.	1242 SW Pine Island Rd Ste 42-502		Cape Coral, FL 33991
	(C A 11	C	f Principal Office)
	(Street Addre	SS OI	17
	If limited liability company is a manager-manage.  The name and usual business addresses of the manager.  Neil D. Pignatano 1242 SW Pine Island	anag	ging members or managers are as follows:
	Linda S. Pignatano 1242 SW Pine Island	Rd	Ste 42-502 Cape Coral, FL 33991
the tran	Nature of business or purposes to be conducted  Information Technology and Management  Signature of a member or an a  (In accordance with section 608.408(3), F.S., the expensition of the law of which it is organized. (A photocological section of the translator must be surely be supposed to the translator must	opy is abmit or p	promoted in Florida:
	<del> </del>	ed n	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.

Cyboarg Enterprises LLC	3	
If unavailable, the alternate to be used in the state of FI	lorida is:	
2. The name and the Florida street address of the registress.		
InCorp Service (Name)	SECRETA ANALLAHAS	2013 APR 30
17888 67th Cour Florida Street Address (P.O. Bo	ırt North	30 Pa
l oveketeke e	OAT DATE	本。 22 68
Loxahatchee FI City/Stat	<u></u>	

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.

Usine & Kolmowski on behalf of Incorp Services, Inc. (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 California

# Secretary of State

### **CERTIFICATE OF STATUS**

**ENTITY NAME: CYBOARG ENTERPRISES LLC** 

FILE NUMBER:

200117210015

**FORMATION DATE:** 

06/04/2001

TYPE:

DOMESTIC LIMITED LIABILITY COMPANY

JURISDICTION:

**CALIFORNIA** 

STATUS:

**ACTIVE (GOOD STANDING)** 

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of April 24, 2013.

DEBRA BOWEN Secretary of State