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AND AHASSEE, FLORIDA

EXAMINER

JUL -1 2013

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: BUSINESS OPPORTUNITY BENEFITS GROUP, LLC				
Name of Limited Liability Company				
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Existence, and check are submitted to register the above referenced foreign limited liability company to transact business.				
Please return all correspondence concerning this matter to the following:				
BOBBY_SIMS				
Name of Person				
BUSINESS OPPORTUNITY BENEFITS GROUP, LLC				
Firm/Company				
5661 DUPREE RD				
Address				
MILTON FL 32571				
City/State and Zip Code				
BOBBYSIMS68@YAHOO.COM				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
BOBBY SIMS at (.850) 736 3428				
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: \$\sum_{\text{S}}\$\$125.00 Filing Fee \text{\$\sum_{\text{Certificate}}\$}\$\$155.00 Filing Fee \text{\$\sum_{\text{Certified}}\$}\$\$Certificate of Status \text{\$\sum_{\text{Certified}}\$}\$\$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.	BUSINESS OPPORTUNITY BENEFITS GROUP, LLC
	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C" or "LLC.")
CO	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written usent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability ompany," "L.L.C," "LLC.")
	NEVADA (Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applicable)
4.	6/7/2013 5. PERPETUAL
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
б.	has not transacted business
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7.	5661 DUPREE RD
	MILTON FL 32571 (Street Address of Principal Office)
	(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:
	BOBBY SIMS
	5661 DUPREE RD MILTON FL 32571
the	. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a instation of the certificate under oath of the translator must be submitted.)
	. Nature of business or purposes to be conducted or promoted in Florida:
	REAL ESTATE INVESTING A
	DA Ray Des
	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.)
	BOBBY SIMS

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	l Liability Company is:			
BUSINESS OPPORTUNITY BENEFITS GROUP, LLC				
If unavailable, the alternate to be used in the state of Florida is:				
2. The name and the Florid	la street address of the registered agent and office are:			
BOBBY S	IMS			
***************************************	(Name)			
5661 DU	PREE RD Florida Street Address (P.O. Box NOT ACCEPTABLE)			
MILTON	FL 32571 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.

\$ 100.00 Filing Fee for Application

(Signature)

\$ 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 Sccretary of State, at the date of this certificate, evidence, BUSINESS OPPORTUNITY BENEFITS GROUP, 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 June 7, 2013, and is in good standing in this state.

STATE OF THE STATE

ROSS MILLER Secretary of State

office on June 21, 2013.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my

Electronic Certificate
Certificate Number: C20130621-2726
You may verify this electronic certificate
online at http://www.nvsos.gov/