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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

(Business Entity Name)

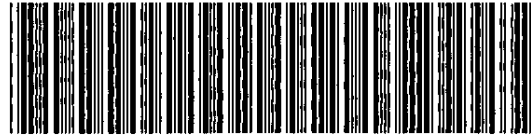
(Document Number)

Certified Copies _____ Certificates of Status _____

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07/01/13--01047--025 **1061.25

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2013 JUL 18 PM 3:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK

JUL 19 2013

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **EVENTURES WORLDWIDE, 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:

JEEV TRIKA

Name of Person

EVENTURES WORLDWIDE, LLC

Firm/Company

9045 STRADA STELL COURT, SUITE 103

Address

NAPLES, FL 34109

City/State and Zip Code

JTRIKA@EVENTURESWORLDWIDE.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Juneyeta Mattix

Name of Person

800 874-2458 x 102

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

Check # 2240 already submitted in the amount of \$1061.25.

(Please see attached overpayment request for refund)

SECRETARY OF STATE
TALLAHASSEE, FL 32301

2013 JUL 18 PM 3:23

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

*IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN
LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. **EVENTURES WORLDWIDE, 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. **IN**

(Jurisdiction under the law of which foreign limited liability company is organized)

3. **EIN: 27-2934493**

(FEI number, if applicable)

4. **JUNE 29, 2010**

(Date of Organization)

5. **PERPETUAL**

(Duration: Year limited liability company will cease 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. **9045 STRADA STELL COURT, SUITE 103**

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:

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: _____

INTERNET RESEARCH

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.)

Jeev Trika

Typed or printed name of signee

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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:

EVENTURES WORLDWIDE, LLC

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:

JEEV TRIKA

(Name)

9045 STRADA STELL COURT, SUITE 103

Florida Street Address (P.O. Box NOT ACCEPTABLE)

NAPLES,

FL

34109

City/State/Zip

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2013 JUL 18 PM 3:23

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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, Greetings:

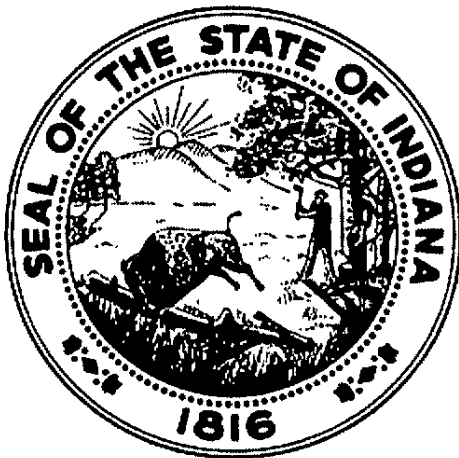
I, Connie Lawson, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

E-VENTURES WORLDWIDE, LLC

duly filed the requisite documents to commence business activities under the laws of State of Indiana on June 29, 2010, and was in existence or authorized to transact business in the State of Indiana on July 16, 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 Sixteenth Day of July, 2013.

Connie Lawson

Connie Lawson, Secretary of State

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2013 JUL 18 PM 3:23
SECRETARY OF STATE
INDIANAPOLIS, IN

e-ventures

9045 Strada Stell Court, Suite 103, Naples, FL 34109, USA
info@eventuresworldwide.com
T: 800-874-2458
F: 888-559-8908

July 16, 2013

TO: Division of Corporations

RE: Overpayment of fees

Hello, we submitted check number #2240 dated June 27, 2013 for payment on our application filing in the amount of \$1,061.25. Today, we were informed that the wrong application had been submitted. We are returning the correct forms to your attention today, but would like to request an overpayment for the remainder of the fees currently in our account.

The filing fees for the new application are \$160.00. The refund amount should be \$901.25. The refund should be made out to E-Ventures Worldwide, LLC. The address to mail the refund is below:

E-Ventures Worldwide, LLC
9045 Strada Stell Court, Suite 103
Naples, FL 34109

Thanks and please let me know if there are any questions on this matter.

Respectfully,

Jeev Trika
8000-874-2458

FILED
2013 JUL 18 PM 3:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 2, 2013

JEEV TRIKA
9045 STRADA STELL COURT
SUITE 103
NAPLES, FL 34109

SUBJECT: EVENTURES WORLDWIDE, LLC
Ref. Number: W13000037867

2013 JUL 18 PM 3:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

We have received your document for EVENTURES WORLDWIDE, LLC and your check(s) totaling \$1061.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited partnership must contain an acceptable suffix. Acceptable limited partnership suffixes include: Limited Partnership, Limited, L.P., Ltd., or LP.

The certificate of existence must be issued within the last 90 days by the Secretary of State which has custody of the records in the jurisdiction under the laws of which the above listed entity is incorporated/organized.

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: 113A00016449