



**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Lighthouse Safety 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:

Peter Charles Lasavage  
Name of Person

Lighthouse Safety LLC  
Firm/Company

1163 San Jose Forest Drive  
Address

St. Augustine, FL 32080  
City/State and Zip Code

peter.lasavage@comcast.net  
E-mail address: (to be used for future annual report notification)

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STATE OF FLORIDA  
DIVISION OF CORPORATIONS

For further information concerning this matter, please call:

Peter Charles Lasavage at ( 904 ) 553-8887  
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 TRANACT BUSINESS IN FLORIDA**

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

1. Lighthouse Safety 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. Wyoming 3. 80-0944055  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. August 14, 2013 5. Perpetual  
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")

6. July 16, 2013  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. 1163 San Jose Forest Drive, St. Augustine, FL 32080  
(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:  
Peter Charles Lasavage  
1163 San Jose Forest Drive, St. Augustine, FL 32080

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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: Safety Consultation, Inspecting

See attached page  
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.)

Peter Charles Lasavage  
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 Liability Company is:

**Lighthouse Safety LLC**

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If unavailable, the alternate to be used in the state of Florida is:

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2. The name and the Florida street address of the registered agent and office are:

**Peter Charles Lasavage**

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(Name)

**1163 San Jose Forest Drive**

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

**St. Augustine FL 32080**

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City/State/Zip

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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)**

# Articles of Organization

## Lighthouse Safety LLC

### Article I

The name of the limited liability company is Lighthouse Safety LLC.

### Article II

The name and address of the registered agent of the limited liability company is WyomingRegisteredAgent.com, Inc., 1621 Central Avenue, Cheyenne, Wyoming 82001.

### Article III

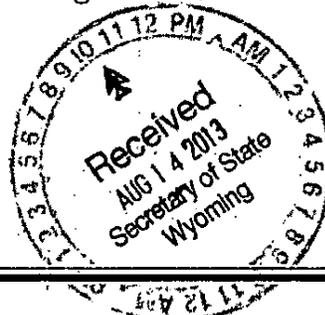
The principal office of the limited liability company is located at: 1621 Central Avenue, Cheyenne, Wyoming 82001.

### Article IV

Neither the members of the limited liability company nor the managers of the limited liability company are liable under a judgment, decree or order of a court, or in any other manner, for a debt, obligation or liability of the limited liability company.

Rose Garcia  
Rose Garcia  
Assistant Secretary  
WyomingRegisteredAgent.com, Inc.

8/14/2013  
Date



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## Consent To Appointment

by

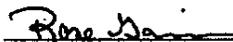
## Registered Agent

I, WyomingRegisteredAgent.com, Inc., with a registered office located at 1621 Central Avenue, Cheyenne, Wyoming 82001, voluntarily consent to serve as the registered agent for Lighthouse Safety LLC on the date shown below.

The registered agent certifies that he is in compliance with the requirements of W.S. 17-28-101 through W.S. 17-28-111.

The registered agent certifies that he is a domestic corporation or not-for-profit domestic corporation whose business office is identical with the registered office.

Executed this day August 14, 2013.



Rose Garcia  
Assistant Secretary  
WyomingRegisteredAgent.com, Inc.

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STATE  
OFFICE  
FLORIDA

**STATE OF WYOMING**  
**Office of the Secretary of State**

I, MAX MAXFIELD, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that the filing requirements for the issuance of this certificate have been fulfilled.

**CERTIFICATE OF ORGANIZATION**

**Lighthouse Safety LLC**

Accordingly, the undersigned, by virtue of the authority vested in me by law, hereby issues this Certificate.

I have affixed hereto the Great Seal of the State of Wyoming and duly executed this official certificate at Cheyenne, Wyoming on this 16th day of August, 2013.

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OFFICE OF THE SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Filed Date: 08/16/2013

*Max Maxfield*  
Secretary of State

By: Karla Stackis

**RESIGNATION OF ORGANIZER**

WyomingRegisteredAgent.com Inc. does hereby resign as organizer of Lighthouse Safety LLC, a Wyoming limited liability company, effective this day August 19, 2013.

By: Rose Garcia  
Name: Rose Garcia  
Title: Assistant Secretary  
WyomingRegisteredAgent.com, Inc.

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REGISTRY OF STATE  
TALLahassee FLORIDA

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**Resolution Of ORGANIZER  
TO APPOINT MANAGER for**

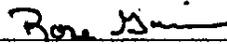
**Lighthouse Safety LLC**

A Wyoming Limited Liability Company (hereafter "LLC")

The organizer of the above named LLC hereby appoints the following people as Manager(s) of the LLC:

<u>Name</u>	<u>Address</u>
Peter Lasavage	1163 San Jose Forest Dr. St. Augustine, FL 32080

Adopted and resolved by the Organizer of the LLC this August 19, 2013.

  
\_\_\_\_\_  
Rose Garcia, Assistant Secretary  
WyomingRegisteredAgent.com, Inc.  
Organizer

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**ACCEPTANCE OF APPOINTMENT AS MANAGER**

**OF**

**Lighthouse Safety LLC**

A Wyoming Limited Liability Company (hereafter "LLC")

I, Peter Lasavage, having been appointed a Manager of the LLC, do hereby accept said position effective as of the time of my appointment on this 23 day of AUGUST, 2013



Peter Lasavage, Manager

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REGISTRY OF STATE  
TALLahasava P 110910A

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