

Division of Corporations
m13000005627 Page 1 of 7
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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13 SEP -6 PM 3:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**Foreign Limited Liability Company
Gemini Applications, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$125.00

J. SAULSBERRY
EXAMINER

SEP 9 2013

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Corporate Filing Menu

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CR2B027 (9/10)

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Gemini Applications, 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:

Jill M. Ormond

Name of Person

Kaplin Stewart

Firm/Company

910 Harvest Drive

Address

Blue Bell, PA 19422

City/State and Zip Code

JORMOND@KAPLAW.COM

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

For further information concerning this matter, please call:

Jill Ormond

Name of Person

610 941-2583

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:

- ☐ \$123.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

2013 SEP -6 AM 8:12
FILED
STATE
TALLAHASSEE, FLORIDA

**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. Gemini Applications, 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. Delaware

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

3.

(FBI number, if applicable)

4. August 30, 2013

(Date of Organization)

5. Perpetual

(Duration: Year limited liability company will cease to exist or "perpetual")

6. upon filing.

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

7. 1819 SE 17th Street, Apt. 608, Ft. Lauderdale, FL 33316

(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:

Please see attached "Addendum to Number 9".

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:

Document management for online applications and work flow processes

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.)

James E. Hopgood, Managing Member

Typed or printed name of signer

2013 SEP -6 AM 8:12

STATE OF FLORIDA

9/6/2013 12:04:42 From: To: 8506176383

(4/6)

Addendum to Number 9

James E. Hopgood - 1819 SE 17th Street, Apt. 608, Fort Lauderdale, FL 33316

Craig Johnston - P.O. Box 35, 22 Featherbed Lane, New Vernon, NJ 07976

Kevin Kirbas - 6159 Pritchett Drive, Powder Springs, GA 30127

J&J Touchpoint, LLC - 2377 Gulf Shore Boulevard, Naples, FL 34103

Prior Planning, LLC - 2900 Glades Circle Suite 1000, Weston, FL 33327

2013 SEP -6 AM 8:12
CLERK OF STATE
TALLAHASSEE FLORIDA

FILED

**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:

Gemini Applications, 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:

James E. Hopgood

(Name)

1819 SE 17th Street, Apt. 608,

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

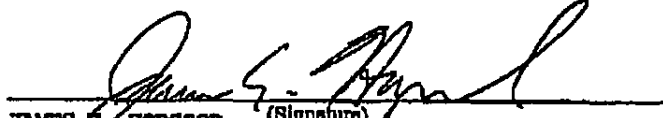
Ft. Lauderdale

FL

33316

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.


JAMES E. HOPGOOD (Signature)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

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CLERK OF STATE
TALLAHASSEE, FLORIDA

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GEMINI APPLICATIONS, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SIXTH DAY OF SEPTEMBER, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

2013 SEP -6 AM 8:12
DEPT. OF STATE
TALLAHASSEE, FLORIDA

FILED

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131061181

You may verify this certificate online
at corp.delaware.gov/authver.shtml




jeffrey w. Bullock, Secretary of State
AUTHENTICATION: 0716184

DATE: 09-06-13