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COVER LETTER

TO: Registration Se Division of Co				
SUBJECT:	LEMARKA	RE PRODUCT 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 corresp	ondence concerning this n	natter to the following:		
 -	VE	TH VOLT Name of Person		
PEMIEVARIE PRODUCTS LLC First Company				
109 E. 1794 AVE. SUITE 4622				
CHEYENE, WY 82001				
Remortable products Il aquail Com E-mail address: (to be used for fiture annual report notification)				
For further information	concerning this maner, ple	one call		
: Or results amortification	conceining cas maner, pic	ase can.		
	Name of Person	Area Code & Dayrime Telephone Number		
MAILING AI		STREET ADDRESS:		
Division of Co		Division of Corporations		
Registration Se		Registration Section		
P.O. Box 6327		Clifton Building		
Tallahassee. Fl	L 32314	2661 Executive Center Circle Tallahassee, FL 32301		
Enclosed is a check for the following amount:				
\$125.00 Filing		see & []\$155.00 Filing Fee & [E160.00 Filing Fee, Certificate		

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IN SUBMITTED TO REGISTER LIMITED LIABILITY COMPANY TO TRANS-ICU BUSINESS ANTI-EL STATE CHILDRED IN TO TRANS-ICU BUSINESS ANTI-EL STATE CHILDRED IN THE FOLLOWING IN SUBMITTED TO REGISTER	A FOREIG	V
LEMAPHARIE TRODUCTE 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 transcering business in Florida and attach a copy consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Company," "L.L.C," "LLC,"	of the written	1
2. 4) YOMING 3.		
2. (Jurisdiction under the law of which foreign limited hability company is organized) (FEI muniber, if applicable)		
4. 9-24-2013 5. PERPETIAL (Date of Organization) 5. (Duration: Year limited liability company will cen	ra IA	
exist or "perpential")	-3C 10	
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)		
7. IDA E. 17th Ave. Some 4622	A A	201
CIOSING LIV ROOM		3 E
(So let Address of Principal Office)		T 2
8. If limited liability company is a manager-managed company, check here		9
9. The name and usual business addresses of the managing members or managers are as follows:	- TI S	일 1일
KEMY Voia		: 27
109 E MT AVE. SUTTE 4620		
CHOSENT IN Som!		
SHETCOSE, WY 02001	·····	
10. Attached is an original certificate of existence, no more than 90 days old, duly authoraic ated by the official having custody the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign langual translation of the certificate under oath of the translation runs; be submitted.)	7 of records in ge, a	l
11. Nature of business or purposes to be conducted or promoted in Florida: C-COMMET	ce_	
sales of products online	·'	
Signature of a member or an authorized representative of a member.		
(In accordance with section 698,498(3), F.S., the accounting of this document constitutes an affirmation under the penalties of perjuty that the facts wated herein are time. I am aware that any fairs information submitted in a	1	
document to the Department of State constitute a third degree felony as provided for in 4.817, 155. F.		
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 Co	BLE PRODUCTS LLC	
If unavailable, the alternate to be used in	n the state of Florida is:	
2. The name and the Florida street addr	ess of the registered agent and office are:	200
Registered Agents In	nc.	日 日 日
	(Name)	1 29 1 29
3030 N. Rocky Point Dr. STE 150A		
	Address (P.O. Box NOT ACCEPTABLE)	PH 12:
Tampa	_{FL} 33607	9日2
	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.

Dan Keen-President
(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 WYOMING Office of the Secretary of State

I, MAX MAXFIELD, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

Remarkable Products LLC

is a

Limited Liability Company

formed or qualified under the laws of Wyoming did on **September 24, 2013**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2013-000651190**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 24th day of October, 2013 at 12:13 PM. This certificate is assigned 014559425.



Maj Massiello
Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.