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(Requ	uestor's Name)					
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PICK-UP	☐ WAIT	MAIL				
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(Document Number)						
Certified Copies	Certificate	s of Status				
Special Instructions to Fi	ling Officer:					

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K.SALY EXAMINER NOV - 8 2013 CR2E027 (9/10)

COVER LETTER

TO:

Registration Section Division of Corporations

Simple Programmer LLC

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..

Name of Limited Liability Company

Please return all correspondence concerning this matter to the following:

John Sonmez				
Name of Person				
Simple Programmer LLC				
Firm/Company				
17926 Timber View St				
Address				
Tampa, FL 33647				
City/State and Zip Code				
john.sonmez@gmail.com				
E-mail address: (to be used for future annual report notification)				

For further information concerning this matter, please call:

John Sonmez

Name of Person

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 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. Simple Programmer LLC (Name of Foreign Limited Liability Company; must include	SINIE OF TROMINE.
(Name of Foreign Limited Liability Company; must includ	e "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose consent of the managers or managing members adopting the altern Company," "L.L.C," "LLC.")	e of transacting business in Florida and attach a copy of the written attended. The alternate name must include "Limited Liability
_{2.} State of Idaho	46-2160581 (FEI number, if applicable)
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
	perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6	······································
(Date first transacted business in Flor (See sections 608.501 & 608.502 F.S.)	to determine penalty liability)
7. 17926 Timber View St	
Tampa, FL 33647	of Principal Office)
(Street Address o	of Principal Office)
8. If limited liability company is a manager-managed c	company, check here
9. The name and usual business addresses of the mana	ging members or managers are as follows:
John Sonmez - 17926 Timber	View St, Tampa FL 33647
Heather sonmez - 17926 Timbe	er View St. Tampa FL 33647
	•
	
10. Attached is an original certificate of existence, no more than 90 c the jurisdiction under the law of which it is organized. (A photocopy	lays old, duly authenticated by the official having custody of records in
translation of the certificate under oath of the translator must be subm	,
11. Nature of business or purposes to be conducted or	promoted in Florida:
Software consulting services/	
Signature of a member or an aut	horized representative of a member.
	tion of this document constitutes an affirmation under the
penalties of perjury that the facts stated herein are true	am aware that any false information submitted in a

Typed or printed name of signee

John Sonmez

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	C .1	F ' ', 1	1 1 1 1114	\sim	•
	The name	Of the	Imuted	1 120111137	Lomnany	. 10.
ι.	THE HAIRC	OI HIL	TITITION.	LIAUINT	Compan	γ 1.5.

Simple Programmer 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:

John Sonmez

(Name)

17926 Timber View St

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

Tampa

33647

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.

(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 Idaho

Office of the Secretary of State

OF OF

SIMPLE PROGRAMMER, LLC

File Number W 122358

I, BEN YSURSA, Secretary of State of the State of Idaho, thereby certify that I am the custodian of the limited liability company records of this State.

I FURTHER CERTIFY That the records of this office show that the above-named limited liability company filed a certificate of organization in Idaho on 22 February 2013.

I FURTHER CERTIFY That the limited liability company has not been dissolved.

Dated: October 30, 2013



Ben youra SECRETARY OF STATE

By Moy Darhan