

Nov 25 13:04:57p

Superbiz.com

15612422818

p.1

M130000007454

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H13000260502 3)))



H130002605023ABCT

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-5383

From:

Account Name : SUPERBIZ.COM, INC.
Account Number : I20070000160
Phone : (800) 494-3124
Fax Number : (561) 455-9885

FILED
13 NOV 25 AM 10:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Email Address: _____

Foreign Limited Liability Company
ANTARCTICA TOURS LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

RECEIVED
13 NOV 25 AM 8:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

T. Burch NOV 26 2013 Help

P

H13000260502 3

**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. ANTARCTICA TOURS 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(Jurisdiction under the law of which foreign limited liability
company is organized)3. 42-1777821

(FEI number, if applicable)

4. NOVEMBER 05, 2013

(Date of Organization)

5. PERPETUAL(Duration: Year limited liability company will cease to
exist or "perpetual")6. UPON QUALIFICATION(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)7. PARANA 959 - 3 FLOOR A DEPARTMENTBUENOS AIRES, CIUDAD AUTONOMA DE BUENOS AIRES 1017

(Street Address of Principal Office)

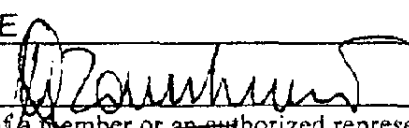
8. If limited liability company is a manager-managed company, check here ☐

9. The name and usual business addresses of the managing members or managers are as follows:

MGRM: ALEJANDRO ZAMBRANOPARANA 959 - 3 FLOOR A DEPARTMENTBUENOS AIRES, CIUDAD AUTONOMA DE BUENOS AIRES 1017

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: _____

ANY LAWFUL PURPOSE
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.)

Alejandro Zambrano

Typed or printed name of signee

H13000260502 3

H13000260502 3

**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:

ANTARCTICA TOURS 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:

SUPERBIZ REGISTERED AGENT, INC.

(Name)

2761 VISTA PARKWAY, STE E4

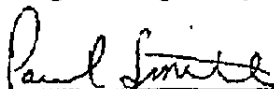
Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

WEST PALM BEACH

FL 33411

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)

FILED
13 NOV 25 AM 10:09
CLERK OF STATE
TALLAHASSEE, FLORIDA

H13000260502 3

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,

ANTARCTICA TOURS LLC
is a
Limited Liability Company

formed or qualified under the laws of Wyoming did on **November 5, 2013**, comply with all
applicable requirements of this office. Its period of duration is Perpetual. This entity has been
assigned entity identification number **2013-000653416**.

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 25th day of November, 2013 at 2:28 PM. This certificate is assigned 014711822.



Max Maxfield
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.

H13000260502 3