# M13660008111

(Re	equestor's Name)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bı	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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12/16/13--01004--009 \*\*81.25

11/26/13--01013--008 \*\*78.75

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### Danielle Jurnak

8024 Plantation Lakes Drive® Port St. Lucie, Fl. 34986® Phone: 724-117-5296 ® Fax: 772-882-9442 E-Mail: daniju nak199vahoo.com

Date: 12-10-2013

Tyrone Scott

RE: Rejection # W13000065519

Division of Corporations – Registration Section PO Box 6327 Tallahassee, Fl. 32314

Dear Mr. Scott:

I am submitting this registration of foreign limited liability company for my company, Lexus Protection Services, as I received a rejection of my original registration as I submitted the wrong form. I was issued **rejection # W13000065519**.

As I submitted a check in the amount of \$78.75 with my previous application, I am now submitting a check for the difference in fee in the amount of \$81.25, this will cover the cost for Filing Fee, Certificate of Status, &-Certifical Copy.

I thank you for your help in processing.

Regards,

Danielle Jurnak

President of Lexus Protection Services



December 16, 2013

DANIELLE JURNAK LEXUS PROTECTION SERVICES, LLC 8024 PLANTATION LAKES DRIVE PORT ST LUCIE, FL 34986

SUBJECT: LEXUS PROTECTION SERVICES, LLC

Ref. Number: W13000065519

We have received your document for LEXUS PROTECTION SERVICES, LLC and your check(s) totaling \$160.00. However, the document has not been filed and is being retained in this office for the following:

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammi Cline Regulatory Specialist II

Letter Number: 913A00028476

#### COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT:

## Lexus Protection Services, 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:

Danielle Jurnak		
Name of Person	70	
Lexus Protection Services, LLC		330
Firm/Company	(4)	9.
8024 Plantation Lakes Dr.	101 	72
Address		- : ប
Port Saint Lucie, Fl. 34986		_ ()1
City/State and Zip Code		
danijurnak1@yahoo.com		
E-mail address: (to be used for future annual report notification)		

For further information concerning this matter, please call:

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	11121	$\sim$ $\sim$	<b>u</b> ll	$\cdots$

724 417-5296

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 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:

(Name of Foreign Limited Liability Comp	LLC pany; must include "Limited Liability Company," "L.	L.C.," or "LLC.")
	ed for the purpose of transacting business in Florida a dopting the alternate name. The alternate name must	
<sub>2.</sub> Pennsylvania	<sub>3.</sub> 46-3678145	
(Jurisdiction under the law of which foreign lin company is organized)	nited liability (FEI number, if app	olicable)
<sub>4.</sub> 06-06-2013	5. Perpetual (Duration: Year limited liability	e4 <b>5</b> 2
(Date of Organization)	(Duration: Year limited liability exist or "perpetual")	
5. N/A	,	G
(Date first transacted	d business in Florida, if prior to registration.) & 608.502 F.S. to determine penalty liability)	0 -n 11
7. 1340 Firwood Dr.		
Pittsburgh, PA 15243		55 55
	(Street Address of Principal Office)	<del>.</del>
3. If limited liability company is a manage	ger-managed company, check here	
The name and usual business addresse	es of the managing members or managers ar	e as follows:
Danielle Jurnak		
1340 Firwood Dr.		
Pittsburgh, PA 15243		
——————————————————————————————————————	no more than 90 days old, duly authenticated by the off ecd. (A photocopy is not acceptable. If the certificate is lator must be submitted.)	
1. Nature of business or purposes to be	conducted or promoted in Florida: Provid	le Guard Services
$\sim$	· Mass	

Typed or printed name of signee

Danielle Jurnak

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.)

## 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.

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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.

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)

# COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

**DECEMBER 21, 2013** 

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

Lexus Protection Services, LLC

is duly organized as a Pennsylvania Limited Liability Company under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT, This Subsistence Certificate shall not imply that all fees, taxes, and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Secretary of the Commonwealth

Certification Number: 11531367-1 Verify this certificate online at http://www.corporations.state.pa.us/corp/soskb/verify.asp