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(Requestor's Name)	<u></u>
(Address)	
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PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
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CONVERSATION WITH

TERRI SPITCAUFSKY 12-30-2013

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COVER LETTER

TO:. Registration Section Division of Corporations	
SUBJECT: Moss Cape LLC	
	oreign Limited Liability Company
Dear Sir or Madam:	
The enclosed application, certificate and fee	e(s) are submitted for filing.
Please return all correspondence concerning	g this matter to the following:
Terri Spitcaufsky	
Name of Person	······································
Moss Cape LLC	
Firm/Company	
1205 Intl. Airport Road, S	uite 101
Address	
Anchorage, AK 99518	
City/State and Zip C	ode
terri.spitcaufsky@mossca	ine com
E-mail address: (to be used for future ann	•
For further information concerning this matt	ter, please call:
Terri Spitcaufsky	_{at (} 907 ₎ 743-9000
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS:
Division of Corporations	Registration Section Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314
Enclosed is a check for the following amou	unt:
\$25 Filing Fee \$\square\$ \$30 Filing Fee & Certificate of Stat	□ \$55 Filing Fee & □ \$60 Filing Fee.

Certified

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

IN COMPLIANCE WITH SECTION 608,303, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. Moss Cape 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 writte
Company," "L.L.C," "LLC.")
₂ Alaska _{3, 27-0910236}
company is organized)
. 06/03/2009 - Parrich (d)
(Date of Organization) 5. Control
exist or "perpetual")
6
7. 1205 EAST INT. AIRPORT RD, STE, 101, ANCHORAGE, AK 99518
(Street Address of Principal Office)
8. If limited liability company is a manager managed company about here
8. If fimited habinty company is a manager-managed company, check here
9. The name and usual business addresses of the managing members or managers are as follows:
James Miner 1205 East Int. Airport Road, Ste 101 Anchorage, AK 99518
ne unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written to of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability anska". 3. 27-0910236 isdiction under the law of which foreign limited liability appay is organized) 6/03/2009 (Date of Organization) (Date first transacted business in Florida, if prior to registration.) (See sections 608,501 & 608,502 F.S. to determine penalty liability) (Street Address of Principal Office) Ilimited liability company is a manager-managed company, check here (Street Address of Principal Office) Ilimited liability company is a manager-managed company, check here Image: Alternate name and usual business addresses of the managing members or managers are as follows: Islames Miner 1205 East Int. Airport Road, Ste 101 Anchorage, AK 99518 Itached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in isdiction 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: Florida based
employee doing sales and management.
ame Mine.
James Miner

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 Company is:	= 9
Moss Cape LLC	- C
If unavailable, the alternate to be used in the state of Florida is:	3 PA F
2. The name and the Florida street address of the registered agent and office are:	
Incorp Services, Inc.	_
(Name)	
17888 67th Court North	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	_
Loxachatchee FL 33470	
City/State Zip	_
Having been named as registered agent and to accept service of process for the above liability company at the place designated in this certificate, I hereby accept the appoint registered agent and agree to act in this capacity. I further agree to comply with the protect the proper and complete performance of my duties, and I am family accept the obligations of my position as registered agent as provided for in Chapter 6 Statutes. Statutes. Statutes This capacity. I further agree to comply with the protect agent as provided for in Chapter 6 Statutes.	nment as provisions of all iar with and 08, Florida
\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent	
\$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)	
3 3.00 Certificate of Status (optional)	

State of Alaska

Department of Commerce, Community and Economic Development Corporations, Business and Professional Licensing

Certificate of Compliance

The undersigned, as Commissioner of Commerce, Community and Economic Development of the State of Alaska, and custodian of corporation records for said state, hereby issues a Certificate of Compliance for:

Moss Cape LLC

This entity was formed on June 03, 2009 and is in good standing. This entity has filed all biennial reports and fees due at this time.

No information is available in this office on the financial condition, business activity or practices of this corporation.



IN TESTIMONY WHEREOF, I execute the certificate and affix the Great Seal of the State of Alaska effective **November 25, 2013**.

Sweek & 11

Susan K. Bell Commissioner