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COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT: Malena Dressage, 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:

Elizabeth N. Clarke
Name of Person
Law Office of Elizabeth Clarke
Firm/Company
P.O. Box 286
Address
South Deerfield, MA 01373
City/State and Zip Code
equinebiz@verizon.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Elizabeth Clarke

,_/413 \ 665-7400

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

Law Office of Elizabeth Clarke

P.O. Box 286 South Deerfield, MA 01373 ph 413-665-7400 fax 413-665-7419 equinebiz@verizon.net

December 13, 2013

Florida Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314

RE: Foreign LLC Registration - Malena Dressage, LLC

Dear Sir or Madam:

Enclosed please find the Foreign LLC Registration and Designation of Registered Agent for Service of Process for Malena Dressage, LLC, a New York limited liability company. Also enclosed are the filing fee of \$125.00 and the original Certificate of Existence from the New York Secretary of State. Please note that despite the appearance this is the original "Certified Copy" provided by the State of New York.

If you have any questions or need anything further to complete this registration, please do not hesitate to contact me as in the letterhead above.

Thank you for processing this registration.

Sincerely yours,

Elizabeth N. Clarke

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. Malena Dressage, LLC	TATE OF FLORIDA;
(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 consent of the managers or managing members adopting the alternate Company," "L.L.C," "LLC.")	
2. New York 3.	46-3264247
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4. August 9, 2013 5.	Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6. December 20, 2013 (Date first transacted business in Florida)	
(Date first transacted business in Florid (See sections 608.501 & 608.502 F.S. to	la, if prior to registration.) determine penalty liability)
7. 94 Tripp St.	determine penalty liability)
Bedford Corners, NY 10549	26
(Street Address of	Principal Office)
8. If limited liability company is a manager-managed co	ompany, check here
9. The name and usual business addresses of the manag	
Micaela Mabragana	
94 Tripp St.	
Bedford Corners, NY 10549	
10. Attached is an original certificate of existence, no more than 90 da the jurisdiction under the law of which it is organized. (A photocopy translation of the certificate under oath of the translator must be submi	is not acceptable. If the certificate is in a foreign language, a
11. Nature of business or purposes to be conducted or p	romoted in Florida: horse training
Eljaleth N. Cli	iche_
Signature of a member or an author	orized representative of a member.

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.)

(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the

Elizabeth N. Clarke

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 Compa Malena Dressage, LLC	any is:	
If unavailable, the alternate to be used in the	e state of Florida is:	
2. The name and the Florida street address of	of the registered agent and office are:	
Mitzi A. Presnel	1	
	(Name)	
553 Golden Wo	od Way	
Florida Street Add	dress (P.O. Box NOT ACCEPTABLE)	
Wellington	_{FL} 33414	
	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.

Minthead (Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

2013 DEC 26 PH 12: 24

State of New York Department of State } ss:

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I hereby certify, that MALENA DRESSAGE, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 08/09/2013, and that the Limited Liability Company is existing so far as shown by the records of the Department.



WITNESS my hand and the official seal of the Department of State at the City of Albany, this 21st day of November two thousand and thirteen.

Autory Siedina

Executive Deputy Secretary of State