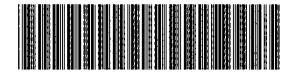
# M140000000166

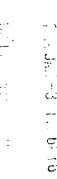
(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(В	usiness Entity Nar	ne)
(De	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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B. POSTICK

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CR2E027	(9/10)	

#### **COVER LETTER**

TO:

Registration Section Division of Corporations

BASIC INVESTMENT, 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 of	concerning this matter to	the following:			
MARTA	ANGULO				
**************************************		Name of Person			
BASIC	INVESTME	NT, LLC.			
		Firm/Company			
P.O. B0	OX 121773				
		Address			
FORT L	AUDERDA	<b>NLE, FL 33</b>	312		
<del></del>	City	//State and Zip Code	·		
mla@ba	asicinvestm				
	E-mail address: (to be u	sed for future annual r	eport notificat	ion)	
For further information concerning	g this matter, please call:				1 C.
Alejandro D	Pel Rio	at (954	865-5	5069	= (**)
Name o	of Person A	Area Code & Daytime	relephone Nu	mber	# Ma 1s
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	Divi Reg Clift 266	sion of Corporations istration Section on Building Executive Center Cirahassee, FL 32301	cle		C
Enclosed is a check for the f	ollowing amount:  \$\square\$ \$130.00 Filing Fee a Certificate of Status			\$160.00 Filing Fe of Status & Certi	

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

TRANSPIET BO	
·	UTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN
LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN T	THE STATE OF FLORIDA:
BASIC INVESTMENT, LLC.	
	clude "Limited Liability Company," "L.L.C.," or "LLC.")
BASIC INVESTMENT FL, LLC.	
	pose of transacting business in Florida and attach a copy of the written lternate name. The alternate name must include "Limited Liability
STATE OF NEVADA	<sub>3.</sub> 46-4085882
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
10/28/2013	<sub>5.</sub> perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
N/R	
(Date first transacted business in (See sections 608.501 & 608.502 F	Florida, if prior to registration.) S.S. to determine penalty liability)
3140 SW 20th Ct	
Fort Lauderdale, FL 33312	
(Street Addre	ess of Principal Office)
3. If limited liability company is a manager-manage	ed company, check here
. The name and usual business addresses of the ma	anaging members or managers are as follows:
MARTA ANGULO / 3140 SW 20th	n CT, Fort Lauderdale, FL 33312 🚊
ALEJANDRO DEL RIO / 3140 SW	/ 20th CT, Fort Lauderdale, FL 33312
ne jurisdiction under the law of which it is organized. (A photo ranslation of the certificate under oath of the translator must be s	•
1. Nature of business or purposes to be conducted	or promoted in Florida: Business development
Shundo P	Mi
Signature of a member or an	authorized representative of a member.
(In accordance with , F.S., the ex	xecution of this document constitutes an affirmation under the

Typed or printed name of signee

ALEJANDRO DEL RIO

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 1	NT TO THE PROVISIONS OF, FLORIDA STATUTE		
	SIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOL		
	`TO DESIGNATE A REGISTERED OFFICE AND REGISTERE	D AGENT I	N THE
STATE OF FI	LORIDA.		
1. The name of	of the Limited Liability Company is:		
BASIC I	NVESTMENT, LLC.		
If unavailable,	the alternate to be used in the state of Florida is:		
BASIC I	NVESTMENT FL, LLC.		
2 The name of	and the Floride street address of the registered seems and afficient		
2. The name a	and the Florida street address of the registered agent and office are	: <u>:</u> i-	Nu. a s
	MARTA ANGULO	;	<u></u>
	(Name)	,	().
	3140 SW 20th ST		
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	· · · · ·	<u></u> č.
	FORT LAUDERDALE ET 33312		C
	City/State/Zip	<del></del>	

Harta J. Angulo
(Signature)

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

SECRETARY OF STATE



# CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **BASIC INVESTMENT**, **LLC**, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since October 28, 2013, and is in good standing in this state.

A PANDA

ROSS MILLER

office on December 6, 2013.

ROSS MILLER Secretary of State

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my

Electronic Certificate
Certificate Number: C20131206-1968
You may verify this electronic certificate
online at http://www.nvsos.gov/