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COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT: Marbles, LLC	
Name of Limited Liability Company	
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate 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:	
William Scott	
Name of Person	
Marbles, LLC	
Firm/Company	
27598 Riverview Center Blvd	
Address	
Bonita Springs, FL 34134	
City/State and Zip Code	
will@marbles1.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Katie Shea888	
Name of Contact 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: \$\Bigsize \text{\$125.00 Filing Fee} \text{\$\Bigsize \$\$\$ \$130.00 Filing Fee & \$\Bigsize \$\$\$ \$Certificate of Status \$\$\$ Certified Copy \$\$\$ \$\Bigsize \text{\$160.00 Filing Fee, Certified Copy} \$\$\$ \$\Bigsize \$\Bigsize \$\$\$ \$\$\$ \$\$\$ \$\$\$ \$\$\$ \$\$\$ \$\$\$ \$\$\$ \$\$\$\$ \$\$\$\$	

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

f name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The altiability Company," "L.L.C," or "LLC.")	ernate name must include "Limited
OH10 3. 46-3446849	
(Jurisdiction under the law of which foreign limited liability (FEI number, company is organized)	if applicable)
1/1/14	
(Date this transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	•
	BLVD
BONITA SPRINGS FE 34 (Street Address of Principal Offide)	134
(Street Address of Principal Office)	
SAME	The state of the s
(Mailing Address)	
7. The name, title or capacity and address of the person(s) who has/have authorit William Scott, Managing Partner	y to manage is/are:
Attached is an original certificate of existence, no more than 90 days old, duly aving custody of records in the jurisdiction under the law of which it is organize ecceptable. If the certificate is in a foreign language, a translation of the certificate must be submitted)	d. (A photocopy is not
hust be submitted)	

William Scott

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

 The name of the Limited Liability Compar
--

Marbles, 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:

William Scott

(Name)

27598 Riverview Center Blvd

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

Bonita Springs

__ 34134

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 605, Florida Statutes.

Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STATE

I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show MARBLES, LLC, an Ohio For Profit Limited Liability Company, Registration Number 2218895, was organized within the State of Ohio on August I, 2013, is currently in FULL FORCE AND EFFECT upon the records of this office.





Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 21st day of January, A.D. 2014.

Ohio Secretary of State

n Hostel

Validation Number: 201402101983