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EXAMINER

COVER LETTER:

TO:

Registration Section
Division of Corporations

SHRIFCT

StuMar, 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:

Mark D. Sadow, St. Louis MO 63117 Name of Person Goffstein, Raskas, Pomerantz, Kraus and Sherman, LLC Firm/Company 7701 Clayton Road Address St. Louis, MO 63117 City/State and Zip Code msadow@grlawstl.com E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

| Mark D. Sadow, St. Louis Mi | O 63117 3 14 7 | 21-7171 | r |
|-----------------------------|------------------------------|---------------------|-------------|
| Name of Contact Person | Area Code | Daytime Telephone ? | Number |
| MAILING ADDRESS: | STREET ADDRESS: | | . ر. د ت |
| Division of Corporations | Division of Corporations | | F-17 |
| Registration Section | Registration Section | , | • |
| P.O. Box 6327 | Clifton Building | | , , |
| Tallahassee, FL 32314 | 2661 Executive Center Circle | | 77 |
| | 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 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| (If name unavailable, enter alternate name Liability Company," "L.L.C," or "LLC.") | adopted for the purpose of transactin | g business in Florida. The alternate | name musi | t include "Limit |
|---|---|--------------------------------------|------------|------------------|
| _{2.} Missouri | 3. <u>n/</u> | а | | |
| (Jurisdiction under the law of which for company is organized) | reign limited liability | (FEI number, if app | licable) | |
| 4 | to Gust turns and havings in Florida | (6) | | |
| (See se | te first transacted business in Florida, ections 605.0904 & 605.0905, F.S. to | determine penalty liability) | | |
| _{5.} 3720 S. Ocean Bl | vd. #202 | | | |
| Highland Beach, F | | | | |
| 2720 C. Oaner Di | (Street Address of Princ | ipal Office) | 7 | rest ran |
| _{5.} <u>3720 S. Ocean Bl</u> | /a. #202 | | | |
| Highland Beach, F | ^F L 33487. | | | Ī. |
| | (Mailing Addre | ess) | · · | + 34 |
| 7. The name, title or capacity a | and address of the person(s) | who has/have authority to | manage i | is/are: |
| Stuart Block, Manag | ier | · | Ĭ. | p 4 Corne |
| 3720 S. OCEAN BLVD. | | | | |
| HIGHLAND BEACH, FL 3 | <u>_</u> | <u></u> | | |
| | | | | |
| 3 | | | · | |
| 3. Attached is an original certifi | | | | |
| naving custody of records in the | e jurisdiction under the law o | f which it is organized. (A | photoco | py is not |
| cceptable. If the certificate is in nust be submitted) | n a toreigh language, a transi | ation of the certificate und | ier oath c | of the transia |
| , | | | | |
| / | willyall | | | |
| - | Signature of an author | orized person | | |

Mark D. Sadow

Typed or printed name of signee

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 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.

| 1. The name StuMar | of the Limited Liability Comp | any is: | |
|--------------------|--|------------------------------------|-------|
| If unavailable | e, the alternate to be used in the | state of Florida is: | |
| 2. The name | and the Florida street address of | of the registered agent and office | are: |
| | Stuart Block | | |
| | | (Name) | |
| | 3720 S. Ocean | Blvd. #202 | 27 PH |
| | Florida Street Address (P.O. Box NOT ACCEPTABLE) | | |
| | Highland Beach | 33487. | |
| | | 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)

STATE OF MISSOURI



Jason Kander Secretary of State 2014 JAN 27 PH 1:41

CORPORATION DIVISION CERTIFICATE OF GOOD STANDING

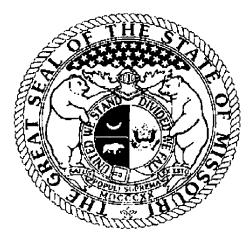
I. JASON KANDER, Secretary of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

STUMAR, L.L.C. LC0081941

was created under the laws of this State on the 16th day of April, 2003, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 17th day of January, 2014

Secretary of State



Certification Number: 15848517-1 Reference:

Verify this certificate online at https://www.sos.mo.gov/businessentity/soskb/verify.asp