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T. BROWN

COVER LETTER

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	ation Section of Corporation	s				
SUBJECT: Ta	all Trees	s, LLC				
SUBJECT:			f Limited	Liability Company		
					Transact Business in Florida," Co pility company to transact business	
Please return all o	correspondence co	oncerning this matter	r to the f	ollowing:		
			NI	ne of Person		
				ne of reison		
_	Blessed	Nest, Inc	C			
			Fire	n/Company		
	PO Box	1111				
-				Address		
	Sorrente	o, FL 327	76			
•			City/Sta	te and Zip Code		
_		E-mail address: (to	be used	for future annual report no	otification)	
For further inform	nation concerning	this matter, please o	call:			
				,		
	Name of	Contact Person		at (,	Daytime Telephone Number	
34.77.77			and the Trans	A DESDE	Duyume vereprone	
	NG ADDRESS: of Corporations	_		TADDRESS: of Corporations		
Registration Section			Registration Section			
P.O. Box 6327 Tallahassee, FL 32314			Clifton Building 2661 Executive Center Circle			
ranta				see, FL 32301		
Enclosed is a	heck for the fo	ollowing amount:				
□ \$125.	.00 Filing Fee	□ \$130.00 Filing F Certificate of Sta		□ \$155.00 Filing Fee Certified Copy	& ■ \$160.00 Filing Fee, Certi of Status & Certified Co	

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:
Tall Trees, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "L.L.C.")
Tall Trees FL, LLC
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.")
_{2.} Wyoming _{3.} 80-0967436
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 1201 Hays Street
Tallahassee, FL 32301
(Sueet Address of Principal Office)
Sorrento, FL 32776
(Mailing Address)
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
Blessed Nest, Inc. (Delaware corp) - sole member & manager
PO Box 1111
Sorrento, FL 32776
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction 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)
La Den
Signature of an authorized person (In accordance with section 605,0203, F.S., the execution of this document constitutes an affirmation under the 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.)

President of Blessed Nest, Inc.

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.

1. The name of the Limited Liability Company is: Tall Trees, LLC						
	, the alternate to be used in the SFL, LLC	ne state of Florida is:				
2. The name a	and the Florida street address	s of the registered agent and office a	re:			
	Corporation Serv	vice Company				
	(Name)					
	1201 Hays Stree	et	ŧ			
	Florida Street Address (P.O. Box NOT ACCEPTABLE)					
	Tallahassee	32301 FL				
		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 Wyoming

Office of the Secretary of State



United States of America. State of Wyoming

I, MAX MAXFIELD, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

Tall Trees, LLC **Limited Liability Company**

formed or qualified under the laws of Wyoming did on March 5, 2013, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number 2013-000639107.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 2nd day of January, 2014 at 10:17 AM.



Secretary of State