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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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T. BROWN

CR2E027 (9/10)

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT: Student Collective, 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:

Carl Myers
Name of Person
Firm/Company
802 W. Windward Way PH10
Address
Lantana, FL., 33462
City/State and Zip Code
r.carl.myers@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Carl Myers

₃₀317 \ 525-8390

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



January 8, 2014

CARL MYERS 802 W WINDWARD WAY PH10 LANTANA, FL 33462

SUBJECT: STUDENT COLLECTIVE, LLC

Ref. Number: W14000001432

We have received your document for STUDENT COLLECTIVE, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that Limited Liability Company forms received prior to January 1, 2014 must be submitted in accordance with Chapter 608, Florida Statutes. If you wish to file pursuant to Chapter 605, please resubmit your document after January 1, 2014. Otherwise, revise your document accordingly.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Teresa Brown Regulatory Specialist II

Letter Number: 114A00000512

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZAT. ON TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTEP: A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. Student Collective, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(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 transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")
2. Lela wave (Jurisdiction under the law of which foreign limited liability company is organized) 3. 46-3089/77 (PEI number, if applicable)
4(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 5. 4400 N. Federal Hwy, Ste 54
Boca Raton, FL, 33431 (Street Address of Principal Office)
6. 4400 N Federal Huy, Ste 54
Boca Roton, FL, 33431 Sm G. (Mailing Address)
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/arc:
Carl Myers - MGR
802 W. Windward Way PHIO
Lantana, FL, 33462
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custod 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.)
Signature of an authorized person
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.)
Carl Myers Typed or printed name of signee
ryped 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:
Student Collective, 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:
Harold Martin (Name)
(Name)
9765 Napoli Woods Lh. Florida Street Address (P.O. Box NOT ACCEPTABLE)
Delray Beach FL 32446 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

\$ 30.00

\$ 5.00

Designation of Registered Agent

Certificate of Status (optional)

Certified Copy (optional)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "STUDENT COLLECTIVE, LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE TWENTY-SEVENTH DAY OF JANUARY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "STUDENT COLLECTIVE, LLC" WAS FORMED ON THE TWENTY-SEVENTH DAY OF JUNE, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

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Jeffrey W. Bullock, Secretary of State

AUTHENTICATION: 1087398

DATE: 01-27-14

You may verify this certificate online at corp.delaware.gov/authver.shtml