M14000000977

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



500252549595

NECEIVED

14 FEB 10 PN # 36

NESION OF COMMISSION

14 FFB 10 14 9:21

A TEB 1 1 2014

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

02/10/14

NAME:

CU MOBILE AUCTION LLC

TYPE OF FILING: FOREIGN LLC

COST:

125.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT: CU Mobile Auction LLC	
Name of Limited Liability Company	
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certifical Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida,	ne of orida
Please return all correspondence concerning this matter to the following:	
Samantha Campbell	
Name of Person	
Registered Agent Solutions, Inc.	
Firm/Company	
1701 Directors Blvd., Suite 300	
Address	
Austin, Texas 78744	•
City/State and Zip Code	
clientservices@rasi.com	
E-mail address: (to be used for future annual report notification)	•
For further information concerning this matter, please call:	
Samentha Campbell c/c Registered Agent Solutions, Inc. 888 705-7274	
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: \$\Begin{array}{c} \Begin{array}{c} \Begin{array}{c} \Begin{array}{c} \S125.00 \text{ Filing Fee} \\ \Certificate \text{ of Status} \end{array} \text{ Certified Copy} \text{ of Status & Certified Copy} \end{array} \$\Begin{array}{c} \S125.00 \text{ Filing Fee} \& \Begin{array}{c} \Begin{array}{c} \S160.00 \text{ Filing Fee}, \text{ Certificate of Status} \\ \text{ Certified Copy} \end{array} \$\text{ of Status & Certified Copy} \text{ Certified Copy}	

APPLICATION BY FOREIGN EIMITED 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 adopted for the Liability Company," "LALC," or "LAC,")	purpose of transacting business in Florida, The	alternate name must include "Limited
_{2.} Texas	3. N/A	
(Jurisdiction under the law of which foreign limited liab company is organized)	offity (FE) number	er, if applicable)
_{4.} upon approval		
(Date first transacter (See sections 605.0904	d basiness in Florida, if prior to registration.) & 605.0905, F.S. to determine penalty liability	/1
5. 4313 Bat Falcon		
Austin, TX 78738		
	treet Address of Principal Office)	
б		2 3
		71 mg
	(Mailing Address)	
7. The name, title or capacity and address of	of the person(s) who has/have autho	1. A.
Robert Blankenship Manage	er 4313 Bat Falcon, A	Austin, TX 78738
Jose Delgado Manager	4313 Bat Falcon, A	Austin, TX 78738
8. Attached is an original certificate of exist	ence, no more than 90 days old, dul	ly authenticated by the official
having custody of records in the jurisdiction		
and a second to the state of the second of t	anguage, a translation of the certific	and unger outh or the translator
	"	
acceptable. If the certificate is in a foreign lamust be submitted)		
must be submitted)	nuture of an authorized person	les of permits that the first stated become are

Robert Blankenship

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.

AGENT IN T	HE STATE OF FLORIDA	١.			
	of the Limited Liability C	• •			
lf unavaitable	:, the alternate to be used i	n the state of Florida is:			
2. The name	and the Florida street add	ress of the registered age	int and office are:	The second secon	
	Registered A	gent Solutions	s, Inc.		
		(Nume)		r <u>.</u>	
155 Office Plaza Dr. Suite A					
	Florida Stree	t Address (P.O. Box NOT AC	CEPTABLE)		rid Sec
	Tallahassee	F1	32301	(7) (2) (3)	3
	**************************************	City/State/Zip		:	्री ',9
					153
liability comp registered ago statutes relati		I in this certificate, I here capacity. I further agree lete performance of my diregistered agent as provide the Ricardo Orozco (Signature)	eby accept the appoint to comply with the pluties, and I am familided for in Chapter 6	ntment as provision. liar with a	s of ali and
	\$ 10 \$ 2	5.00 Designation of R	egistered Agent		
	\$ 30	0.00 Certified Copy (optional)		

\$ 5.00 Certificate of Status (optional)

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Nandita Berry Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for CU Mobile Auction LLC (file number 801645706), a Domestic Limited Liability Company (LLC), was filed in this office on August 24, 2012.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on February 04, 2014.



NANDITA BERRY

Nandita Berry Secretary of State

Phone: (512) 463-5555 Prepared by: SOS-WEB Come visit us on the internet at http://www.sos.state.tx,us/ Fax: (512) 463-5709

TID: 10264

Dial: 7-1-1 for Relay Services Document: 527730630004