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14 FEB 18 PH 3: 12 SECRETARY OF STATE TALLAHASSEE, FLORIDA

#### **COVER LETTER**

TO:

Registration Section

Division of Corporations
SUBJECT: Mount Elbert Limited, 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:
Louis LaMacchia
Name of Person
Mount Elbert Limited, LLC
Firm/Company
15 Paradise Plz #319
Address
Sarasota, FL 34239
City/State and Zip Code
louis@mtelbertltd.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Louis LaMacchia at (303 ) 416-5350
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} \pm \frac{1}{2} \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \



January 21, 2014

LOUIS LAMACCHIA 15 PARADISE PLZ #319 SARASOTA, FL 34239

SUBJECT: MOUNT ELBERT LIMITED

Ref. Number: W14000003833

We have received your document for MOUNT ELBERT LIMITED and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging.

The name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.", also are no longer acceptable. Please amend your document accordingly.

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.

Tim Burch Regulatory Specialist II

Letter Number: 214A00001310

## 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:

1. Mount Elbert Limited, 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. The alternat Liability Company," "L.L.C," or "LLC.")	e name must include "Limited
<sub>2.</sub> Colorado <sub>3.</sub> 45-2923071	
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if approximately company is organized)	licable)
4(Date first transacted business in Florida, if prior to registration.)	
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)  5. 36 S 18th Ave Suite D	TALLU
Brighton, CO 80601	
(Street Address of Principal Office)	SSX 80 1
6. 15 Paradise Plz #319	E C R
Sarasota, FL 34239	STATE OF THE STATE
(Mailing Address)	
7. The name, title or capacity and address of the person(s) who has/have authority to	-
Louis LaMacchia, Owner, 15 Paradise Plz #319 Sarasot	a, FL 34239
	**************************************
8. Attached is an original certificate of existence, no more than 90 days old, duly auth	<u> </u>
having custody of records in the jurisdiction under the law of which it is organized. (A	
acceptable. If the certificate is in a foreign language, a translation of the certificate und must be submitted)	ier oath of the translator
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 per am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as pro	
Louis LaMacchia	

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 Limited Liability Co pert Limited, L				
If unavailable, th	ne alternate to be used in	the state of Florida is:			
2. The name and	I the Florida street addre	ess of the registered agent and office are:			
	John Parente		SECR FALLA	14 FEB	contra
		(Name)	CRETAKY LAHASSEI		Altopage
	150 Whispering Pines Rd		KY OF SEE. I	18 PM	مفيرا
	Florida Street Address (P.O. Box NOT ACCEPTABLE)		STATE LORID	ယ္	10
	Georgetown	32139	AGIS	12	'44 E

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.

City/State/Zip

John Partie (Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

## OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

### CERTIFICATE

I, Scott Gessler, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

#### **Mount Elbert Limited**

is a Limited Liability Company formed or registered on 08/05/2011 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20111449061.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 01/07/2014 that have been posted, and by documents delivered to this office electronically through 01/09/2014 @ 07:24:54.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Denver, Colorado on 01/04/2014 @ 07:24:54 pursuant to and in accordance with applicable law. This certificate is assigned Confirmation Number 8731513.



Secretary of State of the State of Colorado

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Certificate Confirmation Page of the Secretary of State's Web site, <a href="http://www.sos.state.co.us/biz/CertificateSearchCriteria.do">http://www.sos.state.co.us/biz/CertificateSearchCriteria.do</a> entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. <a href="Confirming the issuance of a certificate">Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, <a href="http://www.sos.state.co.us/click">http://www.sos.state.co.us/click</a> Business Center and select "Frequently Asked Questions."