M14000001317

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		į
:		

Office Use Only



400257082454

02/25/14--01020--023 **130.00

14 FEB 25 PH 12: 29

3/3/6

COVER LETTER

TO: **Registration Section Division of Corporations**

Meeting Play 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

Please return all correspondence concerning this	matter to the following:		
Joe Schwinge	r		
	Name of Person		
Meeting Play	LLC		_
	Firm/Company	-	DIVISI
4000 Shafers Mill CT			VISION OF COLLEGE PROPERTY
	Address		25 g
Frederick, MD 21704			FEB 25 PM 12: 29
	City/State and Zip Code	1/4	?: ?: ?: ?
lisa.vann@me	U : J		Q
E-mail addr	ess: (to be used for future annual rep	port notification)	
For further information concerning this matter, p	lease call:		
Lisa Vann	443	226-2515	
Name of Contact Person	n Area Code	Daytime Telephone Number	
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327	STREET ADDRESS: Division of Corporations Registration Section Clifton Building		
Tallahassec, FL 32314	2661 Executive Center Cir. Tallahassee, FL 32301	cle	

MAII

Enclosed is a check for the following amount:

\$\sim\$\$\$\$125.00 \text{ Filing Fee} \text{Fee} \text{\$130.00 \text{ 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:

1. Meeting Play LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	<u>_</u>
(Name of Poleign Limited Liability Company, must include Limited Liability Company, L.L.C., or Ecc.)	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must includiability Company," "L.L.C," or "LLC.")	de "Limited
_{2.} Delaware _{3.} 46-0793609	
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	
4. January 2, 2014	
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
5. 4000 Shafers Mill CT	
Frederick, MD 21704	14 SEAND SE
(Street Address of Principal Office)	CRET
6. 4000 Shafers Mill CT	25 CONTE
Frederick, MD 21704	PA RPG S
(Mailing Address)	TAIL ATTO
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/ar	
MGRM Joe Schwinger, 4000 Shafers Mill CT, Frederi	CK,
MD, 21704	. <u></u>
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by thaving custody of records in the jurisdiction under the law of which it is organized. (A photocopy is acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the must be submitted)	s not .
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 st 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.817.1	ated herein are true. 55, F.S.)
Jal Schwinger	
Tol Schwinger 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.

	Play LLC		
If unavailable, t	he alternate to be used	in the state of Florida is:	
2. The name ar	d the Florida street ad	dress of the registered agent and office are:	
	Robert Van	n	
		(Name)	1 04/2
	8301 SW 39th CT		FEB
	Florida Str	ect Address (P.O. Box NOT ACCEPTABLE)	GF CT 125
	Davie	33328	of Stations PM 12: 29
		City/State/Zip	12: 29

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)

PAGE 1



State of Belaware

SECRETARY OF STATE DIVISION OF CORPORATIONS P.O. BOX 898

DOVER, DELAWARE 19903

140080857

01-30-2014

9016855

JOE SCHWINGER/MEETING PLAY LLC 4000 SHAFERS MILL CT

FREDERICK

MD 21704

ATTN: JOE SCHWINGER

DESCRIPTION	AMOUNT
MEETING PLAY LLC	
5200705 8300 Certificate in Re Short Certification Fee	50.00
FILING TOTAL	50.00
TOTAL PAYMENTS	50.00
SERVICE REQUEST BALANCE	.00

Detaware

PAGE

The First State

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

DELAWARE, DO HEREBY CERTIFY "MEETING PLAY 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 THIRTIETH DAY OF JANUARY, A.D. 2014.

5200705 8300

140080857

AUTHENTYCATION: 1099070

DATE: 01-30-14

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