

2/10/2014

Division of Corporations

M14000032849

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : NORTHWEST REGISTERED AGENT LLC
Account Number : I20090000081
Phone : (509) 768-2249
Fax Number : (323) 544-4790

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

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14 MAR 13 PM 1:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**Foreign Limited Liability Company
Major Investments, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$125.00

14 MAR 13 AM 9:43

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

MAR 14 2014
J. HARRIS

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A
FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. Major Investments, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

Blue River Massage 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. Missouri

(Jurisdiction under the law of which foreign limited liability company is organized)

3.

(FEI 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. 3284 Ivanhoe Avenue

St. Louis MO 63139

(Street Address of Principal Office)

6. 3284 Ivanhoe Avenue

St. Louis MO 63139

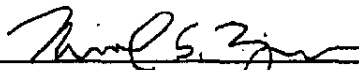
(Mailing Address)

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Michael Major- Member, 3284 Ivanhoe Avenue St. Louis MO 63139

Charles Koelling- Member, 3284 Ivanhoe Avenue St. Louis MO 63139

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)



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.)

Michael Major

Typed or printed name of signee

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**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:

Major Investments, LLC

If unavailable, the alternate to be used in the state of Florida is:

Blue River Massage LLC

2. The name and the Florida street address of the registered agent and office are:

Northwest Registered Agent LLC

(Name)

3030 N. Rocky Point Dr., STE 150A

Florida Street Address (P.O. Box NOT ACCEPTABLE)

Tampa

FL

33607

City/State/Zip

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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.



Dan Keen - Manager

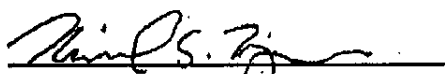
(Signature)

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

FICTITIOUS NAME RESOLUTION

I, Michael Major, member of Major Investments, LLC, a Missouri limited liability company, acting on behalf of the company, authorize use of the fictitious name Blue River Massage LLC, for use in the state of Florida.

Dated this 10th day of Florida, 2014.


Michael Major, Member

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STATE OF MISSOURI



Jason Kander
Secretary of State

**CORPORATION DIVISION
CERTIFICATE OF GOOD STANDING**

I, JASON KANDER, Secretary of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

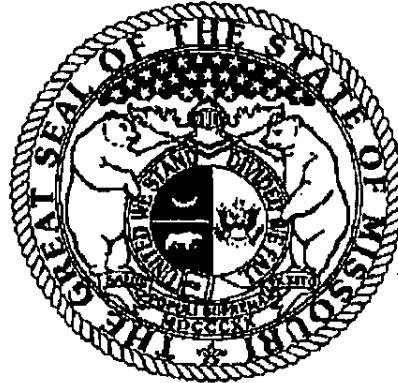
**MAJOR INVESTMENTS, LLC
LC1143392**

was created under the laws of this State on the 20th day of May, 2011, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 10th day of March, 2014

A handwritten signature of Jason Kander in dark ink.

Secretary of State



Certification Number: 15954960-1 Reference:
Verify this certificate online at <https://www.sos.mo.gov/businessentity/sosakb/verify.asp>