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APR - 8 2013

T. HAMPTON

COVER LETTER

	Name of Limited Liability Company
The enclosed "	Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of
	check are submitted to register the above referenced foreign limited liability company to transact business in Florida
Please return a	Il correspondence concerning this matter to the following:
	Sandra DeHerrera
	Name of Person
	Edenborough & Edenborough, CPA's
•	Firm/Company
	PO Box 130
	Address
	Goodwell, OK 73939
	City/State and Zip Code
	sandrae@ptsi.net
	E-mail address: (to be used for future annual report notification)
	ormation concerning this matter, please call:
For further info	Annual concerning the matter, product cum
_	indra DeHerrera "580 349-2684
_	
Sa	Name of Contact Person at (580 Area Code) Area Code Daytime Telephone Number STREET ADDRESS: STREET ADDRESS:
Sa MAII Divisi	Name of Contact Person at (580 Area Code) 349-2684 Daytime Telephone Number
MAII Divisi Regist P.O. E	Name of Contact Person Area Code STREET ADDRESS: On of Corporations at (580) Daytime Telephone Number STREET ADDRESS: Division of Corporations

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. Qvest, LLC			
(Name of Foreign Limited Liability Company	; must include "Limited Liability Company," "L.L.C	D.," or "LLC.")	
(If name unavailable, enter alternate name adopted for the p Liability Company," "L.L.C," or "LLC.")	purpose of transacting business in Florida. The altern	ate name must include "Limited	
2 Oklahoma	_{3.} 26-4780041		
(Jurisdiction under the law of which foreign limited liabil company is organized)	lity (FEI number, if a	(FEI number, if applicable)	
4. 1/17/14			
(Date first transacted (See sections 605.0904 &	business in Florida, if prior to registration.) & 605.0905, F.S. to determine penalty liability)	2011 TAL	
_{5.} 205 SE 2nd ST		7014 APT	
Guymon, OK 73942		55 -	
6. PO Box 436	eet Address of Principal Office)		
Guymon, OK 73942		8	
	(Mailing Address)		
7. The name, title or capacity and address of	f the person(s) who has/have authority t	o manage is/are:	
Benjamin Vega, Owner RR1	Box 81D Goodwell, OK 73	3939	
		, , , , , , , , , , , , , , , , , , , 	
8. Attached is an original certificate of exister having custody of records in the jurisdiction acceptable. If the certificate is in a foreign lar must be submitted)	under the law of which it is organized. (A photocopy is not	
Signa (In accordance with section 605.0203, F.S., the execution of this do am aware that any false information submitted in a document to the			
Benjamin Vega	a		

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.

Qvest, L	of the Limited Liability Company is: LLC	
If unavailable,	the alternate to be used in the state of Florida is:	
2. The name a	and the Florida street address of the registered agent and office are:	
	NRAI Services, Inc.	
	(Name)	
	1200 South Pine Island Road	
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	
	Plantation FL 33324	
	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.

Jan Joy Schroeder, Asst. Secretary

\$ 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



CERTIFICATE OF GOOD STANDING DOMESTIC LIMITED LIABILITY COMPANY

I, THE UNDERSIGNED, Secretary of State of the State of Oklahoma, do hereby certify that I am, by the laws of said state, the custodian of the records of the state of Oklahoma relating to the right of certain business entities to transact business in this state and am the proper officer to execute this certificate.

I FURTHER CERTIFY that <u>OVEST</u>, <u>LLC</u> whose registered agent is <u>BENJAMIN VEGA</u>, with its registered office at <u>RR 1 BOX 81D GOODWELL</u> <u>73939 USA</u> Oklahoma is a <u>Domestic Limited Liability Company</u> duly organized and existing under and by virtue of the laws of the state of Oklahoma and is in good standing according to the records of this office. This certificate is not to be construed as an endorsement, recommendation or notice of approval of the entity's financial condition or business activities and practices. Such information is not available from this office.



IN TESTIMONY WHEREOF, I hereunto set my hand and affixed the Great Seal of the State of Oklahoma, done at the City of Oklahoma City, this 12th, day of March, 2014.

Secretary Of State