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155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

4/29/14

NAME:

RUIWARE, LLC

TYPE OF FILING: APPLICATION

COST:

125.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

**AUTHORIZATION: ABBIE/PAUL HODGE** 

#### **COVER LETTER**

	anon Section n of Corporations	ı							
SUBJECT: R	ulware, LLC.								
		Name	e of Limi	ted Liability Comp	any				
The enclosed "A Existence, and c	application by For heck are submitte	eign Limited Liabili d to register the abo	ity Comp ve refere	any for Authorizat nced foreign limite	ion to Tre ed liability	unsact Business in Flor company to transact	rida," Co business	rtificat in Flor	e of rida
Please return all	correspondence o	concerning this matt	er to the	following:					
		Colleen l	McMah	on					
			Neu	ne of Person					
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		National Corpo		search, Ltd. n/Company					
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		615 South DuPo	ont High	hway					
				Address					
		Dover, DE 19	901					2	
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	,	sop@nationalco	rn com				至調	APR	*AMERICAN
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<del>1,</del>	Name	of Person		Area Code		ne Telephone Number	<b>.</b> ₩₩	ω `	•
Division Registra P.O. Bo	NG ADDRESS: n of Corporations ation Section ox 6327 ssee, FL 32314		Division Registrat Clifton F 2661 Ex	F ADDRESS: of Corporations tion Section Building ecutive Center Cir see, FL 32301	cle	·			
	check for the f i.00 Filing Fee	ollowing amoun S130.00 Filing Certificate of S	Fee &	□ \$155,00 Filin Certified Cop		S160.00 Filing Food Status & Cert			

# 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 COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

, Rulware, 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 and attack consent of the managers or managing members adopting the alternate name. The alternate name must include "Company," "L.L.C," "LLC.")	n a copy o Limited I	f the w	ritten y
2. Delaware 3.			
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)			
4. N/A			
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)			
5. 613 Century Drive			
Largo, FL 33771	£π,	~>	
(Street Address of Principal Office)	(Tiple)	=	-
6. 613 Century Drive	15 (6) 20 (7)	AGR	•
Largo, FL 33771	ASS!	29	-
(Mailing Address)	#75 100	AH	
7. The name, title or capacity and address of the person(s) who has/have authority to mana	ge is/are	<u>.</u>	- Contract
Bret Lowry,CEO 613 Century Drive, Largo, FL 33771	夏园	43	
Xiaoying Zhang, President 613 Century Drive, Largo, FL 33771			
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official havi in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a fittenslation of the certificate under eath 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 of penalties of perjury that the facts stated herein are true. I am aware that any false information subtractions to the Department of State constitutes a third degree felony as provided for in s.81	nitted in a	<b>.</b> )	
Typed or printed name of signee			
Typen 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.

1. The name of the Limited Liability Company is:	
Ruiware, LLC.	
If unavailable, the alternate to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and offi	
National Corporate Research, Ltd., Inc.	2014 APR 2
(Name)	70 R 29
155 Office Plaza Drive	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	FISTATE FLORIDA
Tallahassee FT 32301	ı şm w
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.

Colleen Monaton (Signature)

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

# Delaware

PAGE 1

### The First State

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

DELAWARE, DO HEREBY CERTIFY "RUIWARE, 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 TWENTY-NINTH DAY OF APRIL, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RUIWARE,

LLC." WAS FORMED ON THE TWENTY-EIGHTH DAY OF APRIL, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

WIN APR 29 AM 9: 43

5523738 8300

140533119

AUTHENT CATION: 1328468

DATE: 04-29-14

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