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To:

Division of Corporations

Fax Number : (850)617-6383

From:

ACCOUNT Name : ADVOCATE CONSULTING LEGAL GROUP, PLL

Account Number : 120090000001 Phone : (239)213-0066

Fax Number : (239)213-0698

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

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### Foreign Limited Liability Company TEHL, LLC

Certificate of Status	0
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J. BRUUL

ADVOCATE CONSULTING

Fax: 239+213+0698

May 1 2014 11:57am P002/005 (((H140001046563)))

#### COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: TEHL, 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 fiability company to transact business in Florida.
Please return all correspondence concerning this matter to the following:
Brigette Harms
Name of Person
Advocate Consulting Legal Group, PLLC
Fina/Company
3073 Horseshoe Drive South, Suite 210
Address 22 2
Naples, FL 34104
City/State and Zip Code
brigetteh@advocatetax.com ∰€ 📜 🔭
E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:
Brigette Harms 239 213-0066
Name of Contact Person Area Code Daytime Telephone Number
MAILING ADDRESS:  Division of Corporations  Registration Section P.O. Box 6327  Tallahassee, FL 32314  Ciffon Building Tallahassee, FL 32301
Enclosed is a check for the following amount:  S125.00 Filing Fee S130.00 Filing Fee S S155.00 Filing Fee S S160.00 Filing Fee, Certificate

Certificate of Status

□ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate
Certified Copy of Status & Certified Copy

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### 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

1. TEHL, LLC		
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.J.,C.," or "L.J.C.")	-	
(If name unavailable, onter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Lin Liability Company," "L.L.C," or "L.LC.")	niled	
<sub>2.</sub> Delaware		
(Inrisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)		
4		
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penelty liability)	-	
<sub>5.</sub> 2301 NW 87 Avenue, G135	<b>~</b>	
Doral, FL 33172		
(Streat Address of Principal Office)	-	
<sub>6,</sub> 2301 NW 87 Avenue, G135	_	
Doral, FL 33172	201	
(Mailing Address)	2014 MAY -	
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are	<del></del> <	taren.
Nelson Albareda - Manager 으로		g sanger
2301 NW 87 Avenue, G135	.0: HA	N Contract
Doral, FL 33172	): 09	nwagne di
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the off 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 forcign language, a translation of the certificate under oath of the tran must be submitted)		
Signature of an authorized person		
(in accordance with section 605.0203, F.5., the execution of this document constitutes an affirmation under the penalties of nerjury that the facts stored her aim aware that any folse information submitted in a document to the Department of State constitutes a third degree felony as provided for in \$ 817,155, F.5.	ein are tiud )	: 1
Nelson Albareda		

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.

If unavailab	ele, the alternate to be us	ed in the state of Florida is:	•		
2. The nam	e and the Florida street :	address of the registered agent and office are:			
	Nelson Alb	areda			
	<del></del>	(Name)	<del>_</del>		
	2301 NW 8	37 Avenue, G135		20	
Florida Street Address (P.O. Box NOT ACCEPTABLE)				2014 MAY	cier
	Doral	33172 FL	HAS:	AY-	
liability com registered a statutes rela	pany at the place design gent and agree to act in t iting to the proper and co	City/State/Zip  gent and to accept service of process for the above nated in this certificate, I hereby accept the appoint this capacity. I further agree to comply with the pomplete performance of my duties, and I am family as registered agent as provided for in Chapter 6  (Signature)	niment as Gran provisions of all lar with and	AM 10: 09	

\$ 30.00 Certified Copy (optional)

5.00 Certificate of Status (optional)

May 1 2014 11:57am P005/005

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# Delaware

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# The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TEHL, 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-FOURTH DAY OF APRIL, A.D. 2014.

2014 MAY -1 AM 10: 09

*5522518* 8300

140515018

AUTHENTY CATION: 1318889

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

DATE: 04-24-14

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