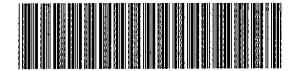
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(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only



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10 ACKROWLEUGE 30FFICIENCY OF FILING

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FILED 14 MAY -2 AM 10: 07



ION SERVICE COMPANY.						
ACCOUNT NO. : 12000000195						
REFERENCE : 117224 7283904						
AUTHORIZATION: Souls Reman						
COST LIMIT : \$ 625.00						
ORDER DATE: May 2, 2014						
ORDER TIME : 3:07 PM						
ORDER NO. : 117224-005						
CUSTOMER NO: 7283904						
FOREIGN FILINGS						
NAME: BEACON STAR LLC						
XXXX QUALIFICATION (TYPE: <u>LL</u>)						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING						
CONTACT PERSON: Emily Gray EXT# 52925						
EXAMINER:						

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Beacon Star 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 liability company to transact business in Florida				
Please return all correspondence concerning this matter to the following:				
Hongli Wang				
Name of Person				
Beacon Dental				
Firm/Compалу				
67 Sandy Pines				
Address				
Hopewell Junction, NY 12533				
City/State and Zip Code				
hongliwang2@yahoo.com				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
George Wang at (718) 961-2361 Name of Contact Person Area Code Daytime Telephone Number				
Name of Contact Person Area Code Daytime Telephone Number				
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				
Enclosed is a check for the following amount: \$\Bigcup \\$125.00 \text{ Filing Fee} \Bigcup \\$130.00 \text{ Filing Fee & Certificate of Status} \Bigcup \\$155.00 \text{ Filing Fee & Certified Copy} \text{of Status & Certified Copy} \$\Bigcup \\$160.00 \text{ Filing Fee, Certificate of Status & Certified Copy} \$\Bigcup \\$160.00 \text{ Filing Fee, Certified Copy} \$\Bigcup \\$160.00 \text{ Filing Fee, Certified Copy} \q\text{ Filing Fee, Certified Copy} \$\Bigcup \tex				

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:

Beacon Star 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. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.")
2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized) 3. 46-5559295 (FEI number, if applicable)
upon filing
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. c/o Beacon Dental, 67 Sandy Pines, Hopewell Junction, NY 12533
The second secon
(Street Address of Principal Office) Same as above
(Mailing Address) 7. The name, title or canacity and address of the person(s) who has/have authority to manage is/ares
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are.
Hongli Wang, Managing Member
c/o Beacon Dental, 67 Sandy Pines, Hopewell Junction, NY 12533
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 penaltics of perjury that the facts stated herein are true 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.)
Hongli Wang

Typed or printed name of signce

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	of the Limited Liabilit	y Company is:			
Beacon Star LLC					
If unavailable,	the alternate to be use	ed in the state of Florida is:			
2. The name a	and the Florida street a	address of the registered agent and office are:			
	Pam Ryan Anderson, c/o Ryan Realty				
	(Name)				
	912 Drew Street, #10	01			
Florida Street Address (P.O. Box NOT ACCEPTABLE)					
	Clearwater	33755 FL			
	-	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.

By: (Signature)

\$ 100.00 Filing Fce 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 "BEACON STAR 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 SECOND DAY OF MAY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BEACON STAR LLC" WAS FORMED ON THE FIRST DAY OF MAY, A.D. 2014.

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

5526580 8300

140556255

Jeffrey W Bullock, Secretary of State AUTHENTY CATION: 1340871

DATE: 05-02-14

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