

#1140000003075

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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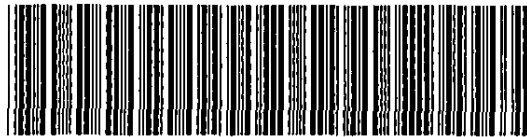
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATION
2014 MAY -5 AM 10:45
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TO ADDRESSEE
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FILED
2014 MAY -5 AM 9:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
MAY -6 2014



CORPORATION SERVICE COMPANY'

ACCOUNT NO. : I20000000195

REFERENCE : 117377 4300A

AUTHORIZATION :

[Handwritten signature]

COST LIMIT : \$ 130.00

ORDER DATE : May 2, 2014

ORDER TIME : 4:22 PM

ORDER NO. : 117377-005

CUSTOMER NO: 4300A

FOREIGN FILINGS

NAME: NULOGIX, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Gray -- EXT# 52925

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: nuLogix, 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:

Shawn Friedel

Name of Person

nuLogix, LLC

Firm/Company

18384 W. Dixie Hwy., Suite C

Address

Miami, FL 33160

City/State and Zip Code

shawn@nulogix.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Shawn Friedel

at

305

4004424

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:

- ☐ \$125.00 Filing Fee ☒ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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. nuLogix, LLC

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

2. Delaware

3. 46-4288349

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

(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. 18384 W. Dixie Hwy, Suite C

Miami, FL 33160

(Street Address of Principal Office)

6. 18384 W. Dixie Hwy, Suite C

Miami, FL 33160

(Mailing Address)

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

Shawn Friedel, Managing Member

18384 W. Dixie Hwy, Suite C

Miami, FL 33160

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.)

Shawn Friedel

Typed or printed name of signer

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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:

nulogix, LLC

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

nulogix of Florida, LLC

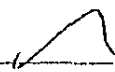
2. The name and the Florida street address of the registered agent and office are:

SHAWN FRIEDER
(Name)

18384 W. Dixie Hwy, Suite C
Florida Street Address (P.O. Box NOT ACCEPTABLE)

Miami, FL 33160
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.


(Signature)

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NULOGIX, 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 "NULOGIX, LLC" WAS FORMED ON THE ELEVENTH DAY OF DECEMBER, A.D. 2013.



5447399 8300

140533248

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


Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 1328563

DATE: 04-29-14