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SECRETARY OF STATE



COVER LETTER

TO:	Registration Section Division of Corporations
SUBJE	CT: Pretty Megan, LLC Name of Limited Liability Company
	Name of Limited Liability Company
	losed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of the, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida
Please re	eturn all correspondence concerning this matter to the following:
	Josh Anderson Name of Person
	Pretty Magua LLC Firm/Company
•	203 Wyatt Avc Address
	OPP AL 36467 City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
For furt	ner information concerning this matter, please call:
	Name of Contact Person at (334) 464 - 3310 Name of Contact Person Area Code Daytime Telephone Number
	MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301
Enclos	ed is a check for the following amount: \$\Boxed{1}\$\$ \$125.00 \text{ Filing Fee} \$\Boxed{1}\$\$ \$130.00 \text{ Filing Fee} \$\Boxed{1}\$\$ \$155.00 \text{ Filing Fee} \$\Boxed{1}\$\$ \$\$160.00 \text{ Filing Fee}, Certificate \text{ Certificate Copy} \text{ of Status & Certified Copy}

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: (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") Pretty Mean Andres 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. Covington County, Alabama (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: AL 36467 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.) 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.

1. The name of the Limited Liability Company is:			
Pretty Magan LLC			_
If unavailable, the alternate to be used in the state of Florida is:			
Pretty Megan Anderson LLC			_
2. The name and the Florida street address of the registered agent and office are:	TALL SE	14	
Joe Levins	CRETAIN LAHASS	14 MAY	emile.
(Name)	1,11,11	2	eponentations es la
108 West Rogers Street	rigg Es	P.	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	TATE ORIDA	6.1.3	line section
Port St. Joe FL 32456 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.

Joe Zum (Signature)

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

Jim Bennett Secretary of State P.O. Box 5616 Montgomery, AL 36103-5616

STATE OF ALABAMA

I, Jim Bennett, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that Pretty Megan, LLC was formed in Covington County, Alabama on March 20, 2014. The Alabama Entity Identification number for this entity is 299-339. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.

TAIL ARYSET FORDA



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In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

4/21/2014

Date

di sum

Jim Bennett

Secretary of State