Florida Department of State

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Foreign Limited Liability Company **HELVETICA TAMPA 24, LLC**

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COVER LETTER

| We don't state to the region of |
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| TO: Registration Section Division of Corporations |
| SUBJECT: HELVETICA TAMPA 24, 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: |
| Jenete Maslonka |
| Name of Person |
| Helvetica Financial LLC |
| Pinn/Company |
| 5927 Balfour Court Suite 208 |
| Address |
| Carlsbad CA 92008 |
| City/State and Zip Code |
| jenete@helveticagroup.com |
| H-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Jenete Maslonka 760 607-5404 |
| Name of Contact Person Area Code Daytime Teléphone Number |
| MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahasseo, 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: \$\Boxed{1} \text{S125.00 Filing Fee} \Boxed{1} \text{S130.00 Filing Fee} \text{\$\Boxed{1} \text{S130.00 Filing Fee} \text{\$\Boxed{1} \text{S160.00 Filing Fee}, Certificate} \text{\$\Boxed{1} \text{Certificate} \text{\$\Boxed{1} \text{Certificate} \text{\$\Boxed{1} \text{Certificate} \text{\$\Boxed{1} \text{S160.00 Filing Fee}, Certificate} \text{\$\Boxed{1} \text{S160.00 Filing Fee}, Certificate} \text{\$\Boxed{1} \text{\$\Boxed{1} \text{S160.00 Filing Fee}, Certificate} \text{\$\Boxed{1} \text{\$\Boxed{1} \text{S160.00 Filing Fee}, Certificate} \text{\$\Boxed{1} \$\Bo |

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. (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The altern Liability Company," "L.L.C." or "LLC.") | · |
|--|---|
| 2. Delaware 3. 46-5670940 | |
| (Jurisdiction under the law of which foreign limited liability (FEI number, if a company is organized) | pplicable) |
| 4. | AL S |
| (Data first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, P.S. to determine penalty liability) | AR E TO |
| 5927 Balfour Court, Suite 208 | 70 |
| Carlsbad CA 92008-7377 | SET OF P |
| (Street Address of Principal Office) | لیکا د ۳۰ |
| 6. 5927 Balfour Court, Suite 208 | <u> </u> |
| Carlsbad CA 92008-7377 | 0F 7 |
| (Mailing Address) | |
| 7. The name, title or capacity and address of the person(s) who has/have authority t | o manage is/are: |
| Helvetica Financial LLC, its Manager | |
| Chad Mestler, Manager/Helvetica Financial LLC | |
| | |
| 8. Attached is an original certificate of existence, no more than 90 days old, duly authorized person (in acceptable. If the certificate is in a foreign language, a translation of the certificate unmust 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 parameters and that any false information submitted in a document to the Department of State constitutes a third degree felony as p | (A photocopy is not nder oath of the translator |
| Chad Mestler | |
| 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.

| I. The name of the Limited Liability Company is: Helvetica Tampa 24, LLC If unavailable, the alternate to be used in the state of Floridadis: | | | | |
|--|---|--|--|--|
| | | | | |
| | eResidentAge | jent, Inc. | | |
| | | (Name) | | |
| | 236 E. 6th Av | ve. | | |
| | Florida Street | eet Address (P.O. Box NOT ACCEPTABLE) | | |
| | Tallahassee | . _{मा} 32303 | | |
| | | City/State/Zip | | |
| liability comp registered ag statutes relati | pany at the place designated ent and agree to act in this a region to the proper and completing to the properties of my position as r | t and to accept service of process for the above stated limited in this certificate. I heraby accept the appointment as a capacity. I further agree to comply with the provisions of plete performance of my duties, and I am familiar with and a registered agent as provided for in Chapter 605, Florida (Signature) | | |
| | \$ 25 | 25.00 Designation of Registered Agent | | |
| ٠ | | 30.00 Certified Copy (optional) 5.00 Certificate of Status (optional) | | |

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO BEREBY CERTIFY "HELVETICA TAMPA 24, 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 FIFTH DAY OF MAY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HELVETICA"
TAMPA 24, LLC" WAS FORMED ON THE SECOND DAY OF MAY, A.D. 2014.

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

5527412 8300

140562170
You may verify this cortificate unline the cortificate unline

Jeffrey W. Sullock, Searctary of Stein

DATE: 05-05-14