M14000

3	(Requestor's Name)	
	(Address)	
	(Address)	
 	(City/State/Zip/Phone #)	
A PICK-U	P WAIT	MAIL
	(Business Entity Name)	
	(Document Number)	
Certified Copies	Certificates of	Status
Special Instruction	s to Filing Officer:	
	MAY 2 2 2014	
	A. LUNT	
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Office Use Only

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A NEWS SHOOTS OF NOTES AN

CORPDIRECT AGENTS, INC. (formerly CCRS) 515 EAST PARK AVENUE TALLAHASSEE, FL 32301 222-1173

FILING COVER SHEET

Examiner's Initials

ACCT. #FCA-23			
CONTACT:	SAVANNAH DEBOER		
DATE:	05/21/2014		
REF. #:	7747814.9151670		
CORP. NAME:	COMPLIANT LEAD LLC	2014 BAY	
() ARTICLES OF INCORPORA	ATION () ARTICLES OF AMENDMENT	() ARTICLES OF DISSOLUTION	
() ANNUAL REPORT	() TRADEMARK/SERVICE MARK	() FICTITIOUS NAME	
(XX) FOREIGN QUALIFICATI	ON () LIMITED PARTNERSHIP	() LIMITED LIABILITY 6	
() REINSTATEMENT	() MERGER	() WITHDRAWAL	
() CERTIFICATE OF CANCELL	ATION		
() OTHER:			
STATE FEES PREPAID WIT	ГН СНЕСК # <u>70020602</u> FOR	\$ <u>155.00</u>	
AUTHORIZATION FOR AC	CCOUNT IF TO BE DEBITED: COST LIMIT:	\$	
PLEASE RETURN:			
(XX) CERTIFIED COPY () CERTIFICATE OF GOOD S' () PLAIN STAMPED COPY () CERTIFICATE OF STATUS	TANDING		

COVER LETTER

TO:

Registration Section

Division of Corporation	8			
SUBJECT: Complian	t Lead LLC			
\ <u>\</u>	Name of Limit	ed Liability Company	у	
The enclosed "Application by Fore Existence, and check are submitted	eign Limited Liability Con I to register the above refe	npany for Authoriza renced foreign limit	ation to Transact Business in Fited liability company to transa	lorida," Certificate, ct business in Florid
Please return all correspondence co	oncerning this matter to the	e following:		言語に
Eileen [Downes			
	7	lame of Person		5
Gould 8	Ratner LLF			
	F	im/Company		
222 N. I	_aSalle St.,	Ste. 800		
444 44		Address		
Chicago	, IL 60601		·	
***		tate and Zip Code		
compliar	nce@gouldr			
	E-mail address: (to be use	d for future annual re	port notification)	
For further information concerning	this matter, please call:	·		
Eileen Dowi	nes	_{at} 312	, 899-1646	
Name of	Contact Person	Arca Code	Daytime Telephone Numi	ber
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Taliahassec, FL 32314	Divisio Registri Clifton 2661 E:	ET ADDRESS: n of Corporations ation Section Building secutive Center Circ ssee, FL 32301	rele	
Enclosed is a check for the fo	llowing amount: \$\Boxed{\text{\$130.00 Filing Fee & Certificate of Status}}	Certified Cop		

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:

1. Compliant Lead LLC	·
(Name of Poreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC."	J
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name mus Liability Company," "L.L.C," or "LLC,")	t include "Limited
_{2.} Delaware 3.	
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)	1 2
4.	
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	2014 BAY
5. 2869 Wilshire Drive, Ste. 204	<u> </u>
Orlando, FL 32835	3
(Street Address of Principal Office) 6. 2869 Wilshire Drive, Ste. 204	S Nie
Orlando, FL 32835	* ,
(Mailing Address)	
7. The name, title or capacity and address of the person(s) who has/have authority to manage i	.s/are:
Terri Gladwell, Manager	
2869 Wilshire Drive, Ste. 204	
Orlando FLF 32835	
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated having custody of records in the jurisdiction under the law of which it is organized. (A photocomic acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of 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 fairn aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in a second and the constitutes are third degree felony as provided for in a second and the constitutes are third degree felony as provided for in a second acceptable.	py is not f the translator ota stated herein are true.
Torri Cladwoll Manager	

Terri Gladwell, Manager

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:

Compli	ant Lead LLC		7-31
If unavailab	le, the alternate to be used	d in the state of Florida is:	7 - 20 - 20 - 20 - 20 - 20 - 20 - 20 - 2
2. The name	e and the Florida street ac	idress of the registered agent and office are:	77 77 177 177 177 177 178 177 178 177 178 177 178 177
	NRAI SERVICES,	INC.	بر ده. پر ۱۹۹۰
		(Namo)	-
	1200 South	Pine Island Road	
	Florida Str	reet Address (P.O. Box NOT ACCEPTABLE)	
	Plantation	FL 33324	
		City/State/Zip	.
liability com registered ag statutes relat	pany at the place designat tent and agree to act in thi ing to the proper and com	nt and to accept service of process for the above seed in this certificate, I hereby accept the appoint is capacity. I further agree to comply with the proplete performance of my duties, and I am families registered agent as provided for in Chapter 60 (Signature)	ment as rovisions of all ar with and 5, Florida

\$ 100.00 Filing Fee 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 "COMPLIANT LEAD 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 TWENTIETH DAY OF MAY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "COMPLIANT LEAD LLC" WAS FORMED ON THE TENTH DAY OF DECEMBER, A.D. 2013.

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

5446258 8300

140665931

DATE: 05-20-14

AUTHENTACATION: 1385136

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