

M14000003793

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

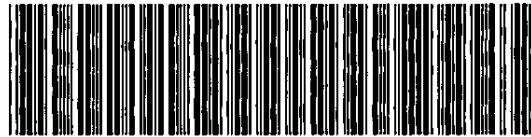
Special Instructions to Filing Officer:

JUN - 3 2014

A. LUNT

W14-33216

Office Use Only



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05/13/14--01017--010 **160.00

RECEIVED
TALLAHASSEE, FLORIDA

2014 MAY 22 PM 12:00

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 28, 2014

EDWISHT OLMANN
17381 SW 302ND ST.
HOMESTEAD, FL 33030

SUBJECT: RAGE ENTERPRISES, LLC
Ref. Number: W14000033216

We have received your document for RAGE ENTERPRISES, LLC and your check(s) totaling \$160.00. However, the document has not been filed and is being retained in this office for the following:

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Agnes Lunt
Regulatory Specialist II

Letter Number: 514A00011465

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: RAGE ENTERPRISES, 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:

EDWISHT OLMANN

Name of Person

RAGE ENTERPRISES, LLC

Firm/Company

17381 SW 302ND ST.

Address

HOMESTEAD, FL 33030

City/State and Zip Code

EDWISHT@HOTMAIL.COM

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

For further information concerning this matter, please call:

EDWISHT OLMANN

Name of Contact Person

at **786**

Area Code

261-5633

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

FILED
2014 MAY 22 PM 12:00
TALLAHASSEE, FL
CLERK OF SUPERIOR COURT

**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. RAGE ENTERPRISES, LLC.

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

RAGE ENT., 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. STATE OF NEVADA

3. 46-5609730

(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. 4109 NE 22ND CT.

HOMESTEAD, FL 33033-5132

(Street Address of Principal Office)

6. 17381 SW 302ND ST.

HOMESTEAD, FL 33030

(Mailing Address)

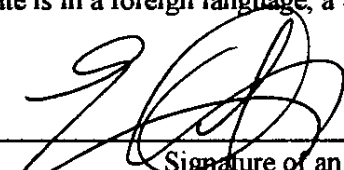
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2014 MAY 22 PM 12:00
TALLAHASSEE FLORIDA
CLERK OF STATE

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

EDWISHT OLMANN, MEMBER

17381 SW 302ND ST., HOMESTEAD, FL 33030

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.)

EDWISHT OLMANN

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:

RAGE ENTERPRISES, LLC.

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

RAGE ENT., LLC.

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

JESULA MILFORT

(Name)

4109 NE 22ND CT.

Florida Street Address (P.O. Box NOT ACCEPTABLE)

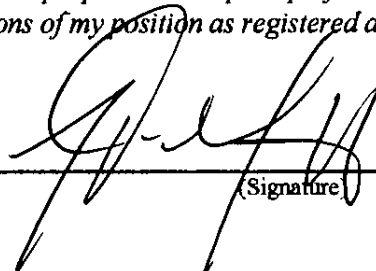
HOMESTEAD

FL 33033-5132

City/State/Zip

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TALLAHASSEE, FLORIDA

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)

SECRETARY OF STATE




CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **RAGE ENTERPRISES, LLC**, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since May 6, 2014, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on May 28, 2014.




ROSS MILLER
Secretary of State

Electronic Certificate
Certificate Number: C20140528-5178
You may verify this electronic certificate
online at <http://www.nvsos.gov/>