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COVER LETTER

TO:

Registration Section **Division of Corporations**

TAZMANIAN HOLDINGS GROUP, LLC

Name of Limited Liability Company

The enclosed Existence, a rida...

Please return all correspondence concerning this ma	tter to the following:
LOUISE JAMES	8
	Name of Person
	Firm/Company
566 LAMSON T	ERRACE
	Address
DELTONA FL 3	2738
	City/State and Zip Code
i3raindead@hot	mail.com
F-mail address:	(to be used for future annual report notification)
For further information concerning this matter, please	se call:
LOUISE JAMES	386 717-8092
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 Certificate of	Fee & S155.00 Filing Fee & S160.00 Filing Fee, Certificate



May 22, 2014

LOUISE JAMES 566 LAMSON TERR DELTONA, FL 32738

SUBJECT: TAZMANIAN HOLDINGS GROUP LLC

Ref. Number: W14000032470

We have received your document for TAZMANIAN HOLDINGS GROUP LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

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.

Jenna D Harris Regulatory Specialist II

Letter Number: 214A00011196

SEGRETARY BE STATE
BIVISHER OF CORP. FRATIAFE
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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. TAZMANIAN HOLDINGS GROUP, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," 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," "L.L.C," or "LLC.")
_{2.} NEVADA _{3.}
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 101 CONVENTION CENTER DR STE 700
LAS VEGAS NV 89109
(Street Address of Principal Office)
6
・ A Table 1 Table 1 Table 1 Table 2
(Mailing Address)
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: 3
LOUISE JAMES - MANAGER - 566 LAMSON TERRACE DELTONA FL 32738
JAMES JAMES, JR MANAGER - 566 LAMSON TERRACE DELTONA FL 32738
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the officia
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 translate must be submitted)
^
Roscia Juria
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 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.)

LOUISE JAMES - MANAGER

Typed or printed name of signce

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.

The name of the Limited Liability Company is:
Tazmanian Holdings group LLC
mavailable, the alternate to be used in the state of Florida is:
The name and the Florida street address of the registered agent and office are:
Business Filings Incorporated
(Name)
515 E. Park Avenue
Florida Street Address (P.O. Box NOT ACCEPTABLE)
Tallahassee32301
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)

DIVISION OF SAME

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

1, 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, immed-hability partnerships and business trusts pursuant to the rolling reveada 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, TAZMANIAN HOLDINGS GROUP, LLC, as a limited liability company duly organized under the large of the state and organized under the large of the State of Nevada since April 4, 2014, and is in good standing in this state.

SAL OF THE SECOND SECON

office on way 6, 2014.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my

ROSS MILLER Secretary of State

Electronic Certificate
Certificate Number: C20140508-0822
You may verify this electronic certificate
online at http://www.nvsos.gov/

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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(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. (Jurisdiction under the law of which foreign limited liability company is organized) 3. (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. 101 Convention Center Dr Suite 700
Las Vagas Neucla 89/109 (Street Address of Principal Office) 6. 5/6/6 Lamson Terrace Deltong Fl 32738
(Mailing Address)
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
Louise Sames
James James
566 Lamson Terrace Deltona F 1 3277
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)
Louise Jun
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, am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in \$ 817.155, F.S.)
Louise James Manager Typed or printed name of signee

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1. The name	of the Limited Liability (Company is:	
lf unavailable	e, the alternate to be used	in the state of Florida is:	
2. The name	and the Florida street add	iress of the registered agent and office are:	
	Business Fili	ngs Incorporated	
		(Name)	,
515 E. Park Avenue			
Florida Street Address (P.O. Box NOT ACCEPTABLE)			
	Tallahassee	FL 32301	_
		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.

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