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SECRETARY OF STATE

JUN 1 2 2014

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COVER LETTER

Division of Corporations	
SUBJECT: Brickworld, LLC	
Name of Limited Liability Company	
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Existence, and check are submitted to register the above referenced foreign limited liability company to transact business.	
Please return all correspondence concerning this matter to the following:	
Bryan Bonahoom	
Name of Person	
Brickworld, LLC	
Firm/Company	
13022 Cullerton Way	
Address	
Fishers, IN 46037	
City/State and Zip Code	2
bryanbonahoom@gmail.com	2014 JUN -9
E-mail address: (to be used for future annual report notification)	= .
For further information concerning this matter, please call:	
Joseph Bonahoom 260 420-4055	PIO 2
Name of Contact Person Area Code Daytime Telephone Number ≥	2
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	ts⊉
Enclosed is a check for the following amount: \$\mathbb{\mathbb{G}}\$\$ \$125.00 Filing Fee \$\mathbb{\mathbb{G}}\$\$ \$\$130.00 Filing Fee & \$\mathbb{\mathbb{G}}\$\$ \$\$155.00 Filing Fee & \$\mathbb{\mathbb{G}}\$\$\$ \$\$160.00 Filing Fee, Cert	

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. Brickworld, LLC			
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC N/A	.")		•
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name mu	st include	Limite	d
Liability Company," "L.L.C," or "LLC.")			
2.Indiana 3. 20-8604334			
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)			
4. N/A			
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)			
5. 13022 Cullerton Way			
Fishers, IN 46037			
(Street Address of Principal Office)			
_{6.} P.O. Box 7114	() ()		
Fishers, IN 46037	番門	2014 JUN	-47 . 1
(Mailing Address)		6	\$*** £
7. The name, title or capacity and address of the person(s) who has/have authority to manage	is/are:	P	2 2 3 4 4
Bryan Bonahoom, Manager/Member		5	Ť.
13022 Cullerton Way		erD	
Fishers, IN 46037			
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 photoc acceptable. If the certificate is in a foreign language, a translation of the certificate under oath 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	opy is r of the t	not cranslate	or
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,	r.5.)	

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.

	of the Limited Liabil	ity Company is:	
If unavailable	, the alternate to be u	sed in the state of Florida is:	
2. The name	and the Florida street	address of the registered agent and office are:	
	Todd Leo	nard	
		(Name)	_ 평, (
	11946 Bo	yette Road	68 5 Es 82 4
	Florida	Street Address (P.O. Box NOT ACCEPTABLE)	- ID 5
	Riverview,	FL 33569	
		City/State/Zip	پ بن تین

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.

Frell Laud
(Signature)

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

STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greetings:

I, Connie Lawson, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

BRICKWORLD, LLC

duly filed the requisite documents to commence business activities under the laws of State of Indiana on January 30, 2007, and was in existence or authorized to transact business in the State of Indiana on May 01, 2014.

I further certify this Domestic Limited Liability Company (LLC) has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this First Day of May, 2014.

Corrie Lawson

Connie Lawson, Secretary of State

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