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SECRETARY OF STATE TALLAHASSEE, FLORIDA

K. SALY EXAMINER

JUN 27 2014



June 16, 2014

THE DORCEY LAW FIRM, PLC CASEY STEWART 10181 SIX MILE CYPRESS PKWY FORT MYERS, FL 33966

SUBJECT: LEONARD FAMILY WYOMING, LLC

Ref. Number: W14000037423

We have received your document for LEONARD FAMILY WYOMING, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Karen A Saly Regulatory Specialist II

Letter Number: 914A00013019

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Leonard Family Wyoming, 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:
Casey Stewart Name of Person
The Dorcey Law Firm, PLC Firm/Company
10181 Six Mile Cypress Parkway
Fort Myers, FL 33966 City/State and Zip Code
Josh Odvice y law. Com Jalhall coe Aoh. com E-mail address! (to be used for future annual report notification)
For further information concerning this matter, please call:
Casey Stewart at (239) 418 - 0169 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: \$\Boxed{155.00 Filing Fee} \times \time

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. Leonard Family Wyoming, 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. Uyuming 3. 2014 - 000 le le 28 le (FEI number, if applicable)
4
5. 3902 S.E 19th Place = 50 = 77
Cape Coral, FL 33904 (Street Address of Principal Office) 28.02 (F 104 04)
6. 3902 SE, 19th Place Cape Coval FL 33904 (Mailing Address)
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
John A. Leonard, MGR - 3902 S.E. 19th Place, Cape Coral, FL 33904
Pamela A. Richo-Leonard, MGR - 3902 S.E. 19th Place, Cape Coral, FL 33904
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.)
John A. Leonard Typed or printed name of signee
r ypeu 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:	
Leonard Family Wyoming, LLC.	The same
If unavailable, the alternate to be used in the state of Florida is:	SEE FLOW
2. The name and the Florida street address of the registered agent and office are:	<u> </u>

엉.

DLF Registered Agent Service, LLC (Name)

10181 Six Mile Cypress Parkway, Swite C Florida Street Address (P.O. Box NOT ACCEPTABLE)

Fort Myers FL 33966
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)

STATE OF WYOMING Office of the Secretary of State

I, MAX MAXFIELD, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

is a Limited Liability Company

formed or qualified under the laws of Wyoming did on **June 5, 2014**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2014-000666286**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 24th day of June, 2014 at 7:52 AM. This certificate is assigned 015844329.



Mas Massielo
Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.