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| (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: |  |  |  |  |
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Office Use Only



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## FLORIDA DEPARTMENT OF STATE Division of Corporations

June 11, 2014

ROGER PELIEW 942 LA COSTA CIRCLE #3 SARASOTA, FL 34237

SUBJECT: THE SMART DASH LLC Ref. Number: W14000036199

We have received your document for THE SMART DASH 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):

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 the corrected original and one copy of 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.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 814A00012566

#### **COVER LETTER**

Registration Section
Division of Corporations

TO:

| SUBJECT:                        | THE SMA   | ME of Limited Liability Company   |
|---------------------------------|---|---|
|                                 |   | ability Company for Authorization to Transact Business in Florida," Certificate of above referenced foreign limited liability company to transact business in Florida |
| Please return all               | correspondence concerning this n  | natter to the following:  |
|                                 | Roger   | Pécien  |
|                                 | THE SMAX  | Price Name of Person  TOASH LLC   |
| •                               | <del></del>   | Firm/Company  |
|                                 | 942 LA COS  | TA CIRCLE \$ 3  Address   |
|                                 |   | Address   |
|                                 | SALA SOTA   | FL 3x237  |
|                                 |   | FL 3×237 City/State and Zip Code  w 2 40 fMai(- (o M  |
|                                 |   | s: (to be used for future annual report notification)   |
| 4                               | mation concerning this matter, ple  | •   |
|                                 | - 1   | at (47) 873 37 89   |
| Division<br>Registra<br>P.O. Bo | Name of Contact Person  ING ADDRESS: In of Corporations ation Section ox 6327 ISSEE, FL 32314 | Area Code Daytime Telephone Number  STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 |
| Enclosed is a                   | check for the following amo<br>5.00 Filing Fee \$130.00 Fili<br>Certificate of                |   |

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

| IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IN<br>FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF  |   |
|--|---|
| 1. THE SMAKT DASH LL C  (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.  |   |
| (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 alt Liability Company," "L.L.C," or "LLC.")   |   |
| 2. DÉLAWAKE 3. 47-100  | 03151   |
| 2. DÉLAWAKE (Jurisdiction under the law of which foreign limited liability company is organized)  3. 47-100 (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. TYZUA COSTA CIRCLE & 3  | ,   |
| 5. SANA SOJA FL 34237  (Street Address of Principal Office)  |   |
| 6. 942 LA COSTA CIRCLE \$3  SALASS A, FL 34237  (Mailing Address)  |   |
| SALAS- LA F1 34237   |   |
| (Mailing Address)  |   |
| 7. The name, title or capacity and address of the person(s) who has/have authorit  | ty to manage is/are:                              |
| ROSER PELLEW DIRECTOR  |   |
| POSEN PELLEW, DIRECTOR  9 +2 LA COSPA CIRCLE #3  |   |
| SALASOTA, FL 34237   |   |
|  | CO 17-4   |
| 8. Attached is an original certificate of existence, no more than 90 days old, duly a having custody of records in the jurisdiction under the law of which it is organized.  | -free -   |
| acceptable. If the certificate is in a foreign language, a translation of the certificate  |   |
| must be submitted)   |   |
| My Mellan  |   |
| Signature of an authorized person  | of nations that the facts stated havein an amount |
| (In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties 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.)               |
| ROSER PELLEW   | lar Maria   |
| 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:  |                                    |                               |   |
|---|------------------------------------|-------------------------------|---|
| THE SMART DASH LLC  |                                    |                               |   |
| If unavailable, the alternate to be used in the state of Florida is:  |                                    |                               |   |
| 2. The name and the Florida street address of the registered agent and office are:  |                                    |                               |   |
| ROSER PELLEW (Name)   |                                    |                               |   |
| (Name)  |                                    |                               |   |
| 942 LA COSTA CIRCIE   |                                    |                               |   |
| Florida Street Address (P.O. Box NOT ACCEPTABLE)  |                                    |                               |   |
| SALASOTA FL 3K237 City/State/Zip  |                                    |                               |   |
| City/State/Zip  |                                    |                               |   |
|   |                                    | ()<br>()                      | į |
| Having been named as registered agent and to accept service of process for the above liability company at the place designated in this certificate, I hereby accept the appoint registered agent and agree to act in this capacity. I further agree to comply with the p statutes relating to the proper and complete performance of my duties, and I am familiaccept the obligations of my position as registered agent as provided for in Chapter 60 Statutes.  (Signature) | ntment as<br>provision<br>iar with | imited<br>s<br>is of a<br>and |   |
| \$ 100.00 Filing Fee for Application  |                                    |                               |   |

\$ 25.00 Designation of Registered Agent **Certified Copy (optional)** 

Certificate of Status (optional)

\$ 30.00

\$ 5.00

# Delaware

PAGE :

### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "THE SMART DASH, 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 NINETEENTH DAY OF JUNE, A.D. 2014.

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AUTHENT (CATION: 1468993

DATE: 06-19-14

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