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SRM 7/22/14 W14000042081

COVER LETTER

Division of Corporations
SUBJECT: KAM Ventures LLC Name of Limited Liability Company
Traine of Elimed Grading 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:
Ana V. Marshall Name of Person
KAM Ventures, LLC Firm/Company
122 Marlberry Circle
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Ana Marshall at (561) 719-5550 Name of Contact Person Area Code Daytime Telephone Number
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, Fl. 323142661 Executive Center Circle Tallahassee, Fl. 32301
Enclosed is a check for the following amount: \$\sigma \frac{1}{2}\$ \$125.00 Filing Fee \square \square \text{S130.00 Filing Fee & Certificate of Status} \square \text{S155.00 Filing Fee & Certified Copy} \square \frac{1}{2}\$ \$160.00 Filing Fee. Certified Copy



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 9, 2014

ANA V. MARSHALL 122 MARLBERRY CIRCLE JUPITER, FL 33458

SUBJECT: KAM VENTURES LLC Ref. Number: W14000042081

We have received your document for KAM VENTURES 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):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

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.

Elliott R McCaskill Registration Specialist II

Letter Number: 714A00014714

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: anie 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.") (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, (Pprior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: manager 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 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 t am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in the penalties of perjury that the penalties of penalt

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.

If unavailable, the alternate to be used in the state of Florida is:				
2. The name ar	nd the Florida street addre	ess of the registered agent and office are:		
	Business Filin	igs Incorporated		
		(Name)	_	
	515 E. Park A	venue		
	Florida Street	Address (P.O. Box NOT ACCEPTABLE)	-	
		22204		
	Tallahassee	_{ਸ਼ਹ} 32301		

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, **KAM VENTURES**, **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 June 18, 2014, and is in good standing in this state.

THE CO.

Electronic Certificate
Certificate Number: C20140701-1113
You may verify this electronic certificate
online at http://www.nvsos.gov/

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on July 1, 2014.

ROSS MILLER Secretary of State SECRETARY OF STATE

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