M14000009407

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	· #)
PICK-UP	TIAW T	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
,		
W14-49	5686	

Office Use Only



400262559984

07/25/14--01007--016 **125.00

2014 JUL 29 P 5: 58

B. BOSTICK JUL 3 0 2014 EXAMINER

COVER LETTER

TO:		on Section of Corporati	ons									
SUBJE	ст:	BANG	γ	Son:	PA	2 TNEE 5		LLC				
				Name o	of Limited Lie	ibility Company	′ •					
						for Authoriza d foreign limit						
Please	return all cor	rrespondence	concerni	ng this matte	r to the foll	owing:						
		C	o.in	HA	11							
					Name	of Person						
		BAN	Can	Son	: Pa	et Nee 5	-					
		<u> </u>			Firm/C	Company						
		957	h 4	an a	le F	beest	RI	od	5 1 .	BZ-	340)
		,,,,		-3-1	Ad	dress	~ ~					
					. .	•						
		DAU	Cool	ville	, FL	3 2 2 and Zip Code	<u>.22</u>					
					City/State a	and Zip Code						
		DA	(rd.	e 7	-eam	MAR	02	. con	•			
			E-ma			future annual re						
For fur	her informat	tion concerni	ng this ma	itter, please	call:					<u>.</u> -4		
			-							7. 7. SEC	2014	
	Bair	as Ha			at	(25) Area Code	_);	<u>583-</u>	- 2221	経済	=	
		Name	of Contact	Person		Area Code		Daytime '	Telephone N	umber :	1014 JUL 29	
		ADDRESS			STREET A							
	Division of Registration	f Corporation	15		Division of Registration	Corporations Section				CF STAI	U	
	P.O. Box 6				Clifton Buil					윤달	ά	
	Tallahasse	e, FL 32314			2661 Execu Tallahassee	tive Center Ci , FL 32301	rcle			DM >	58	
Enclos	sed is a ch	eck for the	followir	ng amount	:							
		Filing Fee	□ \$130	0.00 Filing I	Fee & □	\$155.00 Filin			160.00 Fili			;
			Cer	ificate of St	atus	Certified Co	ру	C	of Status &	Certified	Сору	

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

Name of Foolign Limited Liability Company; must include "Limited Company; must include Company; must i	
f name unavailable, enter alternate name adopted for the purpose of transacting bu iability Company," "L.L.C," or "LLC.")	siness in Florida. The alternate name must include "Limited
	o-330 3372
. Ne uada (Jurisdiction under the law of which foreign limited liability company is organized) 3.	(FEI number, if applicable)
July 1 2014	
(Date first transacted business in Florida, if proceedings of the control of the	ior to registration.) mine penalty liability)
9576 ARgyle Forest Ble	od Ste B2-340
JackBON ville FI 3222	₹
JACKSON UITE FL 3222 (Street Address of Principal EAME AT ABOUL	Office)
SAME AT ABOUT	lw n D3
	\$ 5 C C C C C C C C C C C C C C C C C C
(Mailing Address)	
. The name, title or capacity and address of the person(s) who	has/have authority to manage is/are.
Brigo Hall - MGR	
Brigo Hall - MGR Shailendea Soni - MGR	5: 5: DRIE
34,4,4,4,4,4,4,4,4,4,4,4,4,4,4,4,4,4,4,	<u></u>
	
Attached is an original certificate of existence, no more than	•
ving custody of records in the jurisdiction under the law of w ceptable. If the certificate is in a foreign language, a translation	* * * * * * * * * * * * * * * * * * * *
ust be submitted)	or the commence and or the numbers
65 Hall	
	ad narron
Signature of an authoriz	nation under the penalties of perjury that the facts stated herein are true.
aware that any false information submitted in a document to the Department of State const. Brim HAII Marie	• • •

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.

	BANYAN	Soni	PARTNERS,	LLC		
If unavailal	ble, the alternate to be	e used in the	state of Florida is:			
2. The nan	ne and the Florida str	eet address o	of the registered agen	t and office are		
	Baile	n Ha	Į.			
			(Name)		SE SE	
	9526 AL	aule F	ress (P.O. Box NOT ACC	Ste B:	SECROTARY OF S	
	Flor	ida Street Add	ress (P.O. Box NOT ACC	EPTABLE)	29 SSE	1
	JACKSON	ر,'\ le	FL City/State/Zip	32122		
					S8	
liability con registered a statutes rela	n named as registered npany at the place de ngent and agree to act ating to the proper an obligations of my posi	signated in the in this capa d complete p	nis certificate, I hereb city. I further agree t erformance of my dui	y accept the app o comply with t ties, and I am fa	pointment as he provisions of imiliar with and	
	Ballol					
		(Signat	ture)			

Filing Fee for Application \$ 25.00 Designation of Registered Agent **Certified Copy (optional)**

Certificate of Status (optional)

\$ 30.00

5.00

SECRETARY OF STATE



TILED 2M JUL 29 P 5: 58 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, BANYAN SONI PARTNERS 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 July 10, 2013, and is in good standing in this state.

O DE CONTROL OF THE PARTY OF TH

Electronic Certificate
Certificate Number: C20140723-1317
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 23, 2014.

ROSS MILLER Secretary of State



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 25, 2014

BRIAN HALL 9526 ARGYLE FOREST BLVD. SUITE B2-340 JACKSONVILLE, FL 32222

SUBJECT: BANYAN SONI PARTNERS, LLC

Ref. Number: W14000045686

We have received your document for BANYAN SONI PARTNERS, 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.

Barbara Bostick Regulatory Specialist II

Letter Number: 314A00015994

2014 JUL 29 P 5: 59
SECRETARY OF STATE