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Writer's Direct Dial: 703.934.9832 Writer's email: scollins@ritzert-leyton.com

August 25, 2014

Division of Corporations Registration Section P. O. Box 6327 Tallahassee, FL 32314

RE: CLS Bookkeeping, LLC-- Application to do Business in Florida

Dear Sir or Madam:

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida, "Virginia Certificate of Fact of Existence, and check in the amount of \$125.00 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:

Susan V. Collins, Paralegal Ritzert & Leyton, P.C. 11350 Random Hills Road, Suite 400 Fairfax, VA 22030

The email address for future notification is <u>scollins@ritzert-leyton.com</u>. For further information concerning this matter, please call me at (703) 934-2660.

Thank you for your assistance.

Sincerely,

Susan V. Collins, Paralegal

Enclosures

cc: Ms. Cindy Salyards Long

Commonwealth of Hirginia



State Corporation Commission

CERTIFICATE OF FACT

I Certify the Following from the Records of the Commission:

That CLS Bookkeeping, LLC is duly organized as a limited liability company under the law of the Commonwealth of Virginia;

That the date of its organization is May 26, 2011; and

That the limited liability company is in existence in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.

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Signed and Sealed at Richmond on this Date: August 21, 2014

Joel H. Peck, Clerk of the Commission

CISECOM

Document Control Number: 1408215780

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: CLS Bookkeeping, LLC (Name of Porciga Limited Lish fily Company, must suchable "Lineard Lishiday Company," L.L.C., or "LLL.") (If name unavailable, once alternate name adopted for the purpose of transacting business in Florida. The alternate mame must include "Limited Lizzility Company," "LLLC," or "LLC.") Virginia 2. (furnished and of the law of which foreign limited hability company is organizad) (Dute first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, P.S. to determine penalty liability) 1177 Causeway Blvd. Sanibel, FL 33957 (Street Address of Principal Office) 844 Lindgren Blvd. Sanibel, FL 33957 (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Cindy Salyards Long, Member Manager 3 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 (he accountance with section 605,0003, F.S., the executions of this discurrent constitutes an affirmation under the persulties of perjusy that the faces stated become are true. I am aware that any false information authorities in a document to the Department of State constitutes a third degree fellows as provided for in 6.817.153, F.S.) Cindy Salyards Long 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:
CLS Bookkeeping, 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:
Cindy Salyards Long
(Name)
1177 Causeway Blvd.
Florida Street Address (P.O. Hox NOT ACCEPTABLE)
Sanibel 33957
City/State//.ip
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.
Meder Sele prolement 55 65 65 65 65 65 65 65 65 65 65 65 65
\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)