Florida Department of State

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Foreign Limited Liability Company The Learning Well LLC

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Corporate Filing Menu

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9/12/2014

COVER LETTER

BJECT:	The Learning Well LLC	
		Name of Limited Liability Company
		mited Liability Company for Authorization to Transact Business in Florida," Certific lister the above referenced foreign limited liability company to transact business in F
ise return i	ali correspondence concerni	ing this matter to the following:
	David Gundell	
		Name of Person
	Luxury Brand Partners,	
		Firm/Company
	4141 NE Second Avenue	
		Address
	Minmi, FL 33137	
		City/State and Zip Code
	davidg@luxurybrandpart	
	E-ma	ail address; (to be used for future annual report notification)
further inf	ormation concerning this ma	atter, please call:
Davi	d Gundell	at (305) 417-6426 1 Person Area Code Daytime Telephone Number
	Name of Contact	1 Person Area Code Daytime Telephone Number
MAI	Ling address:	STREET ADDRESS:
	ion of Corporations	Division of Corporations
	tration Section	Registration Section
	Box 6327	Clifton Building 2661 Executive Center Circle
£ 81181	hassec, FL 32314	Taliahassoo, FL 32301
losed is	a check for the following	ng amount:

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

IN COMPLIANCE WITH SECTION 6051902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: The Learning Well LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter elternate name adopted for the purpose of transacting business in Florida. The elternate name must include "Limited Liability Company," "L.L.C," or "LLC.") 2. Delaware (Jurisdiction under the law of which fareign limited liability company is organized) (FEI number, if applicable (Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, P.S. to determine penalty liability) 4141 NE 2nd Avenue, Suite 205, Miaml, FL 33137 (Street Address of Principal Office) 4141 NE 2nd Avenue, Suite 205, Miami, FL 33137 (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Luxury Brand Pariners, LLC -Managing Member 4141 NE 2nd Avenue, Suite 205, Miami, Fl. 33137 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 follows as provided for in a \$17.155, F.S.)

David Gundell

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	e and the Florida street address of the registered agent and offic	ce are:	
	C T Corporation System	,	
	(Näme)	· ····································	
	1200 South Pine Island Road		
	1200 South Pine Island Road Florida Street Address (P.O. Box NOT ACCEPTABLE)	- Archine	

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.

Angel Nunez

Assistant Secretary

Angel Winezing Fee for Application

angel Winezing Fee for Application

angel Winezing Fee for Application

critical Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

DACE.

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "THE LEARNING WELL 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 ELEVENTH DAY OF SEPTEMBER, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5601449 8300

141166792

You may verify this cartificate online at corp. dalaware. gov/authver. shtml

AUTHENTY CATION: 1689038

DATE: 09-11-14