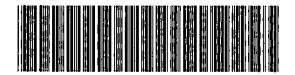
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

#### **COVER LETTER**

вивјест: <u>Uma</u>	& Karen, LLC Name of Limited Liability Company	
•	Name of Limited Liability Company	
The enclosed "Application by Fore Existence, and check are submitted	eign Limited Liability Company for Authorization to Transact Business in Florid I to register the above referenced foreign limited liability company to transact bu	a," Certificate siness in Florid
lease return all correspondence co	oncerning this matter to the following:	
M	ichele Villmer Namo of Person	_
	Name of Person	
Acc	Countring Professionals Firm/Company	_
РО	Box 572 Address	
Un	City/State and Zip Code	<del></del>
acc	ct pros@ Shcglobal. net 12-mail address: (to be used for future annual report notification)	<del></del>
or further information concerning		
Michele Name of	VIII mer at (Lo3Le ) 583-4710  Contact Person Area Code Daytime Telephone Number	_
MAILING ADDRESS: Division of Corporations	STREET ADDRESS: Division of Corporations	
Registration Section P.O. Box 6327	Registration Section Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a check for the fo	ollowing amount: □ \$130.00 Filing Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee,	0.45

### 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:
Uma & Karen, 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:
Karen McCoy (Name)
3389 SW Foremost Dr Florida Street Address (P.O. Box NOT ACCEPTABLE)
Port St Lucie, FL 3495.3 City/State/Zip
Having been named as registered agent and to accept service of process for the above stated limited

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.

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\$ 100.00 Fi

Filing Fee for Application

9:42

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

5.00 Certificate of Status (optional)

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE POLITOWING IS SUBMIT POREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA	
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "I	LC.")
If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name liability Company," "L.L.C," or "LLC.")	must include "Limited
2. Missouri 3. 46-4244138_	
2. MISSOURI 3. 46-4344138 (Jurisdiction under the law of which foreign limited liability company is organized) (FBI number, if applicable company is organized)	<del>)</del>
1. 12/1/14	·
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine ponalty liability)	
5. 10081 S Federal Highway	
Port St Lucie, FL 34952 (Street Address of Principal Office)	
(Street Address of Principal Office)	,
5. <u>SAME AS #.5</u>	
	PS 1
(Mailing Address)	> S
7. The name, title or capacity and address of the person(s) who has/have authority to man	ana dara N
	(D) = 1
Umnderi Boppana, Member, 155 Roxbury Dr. O'Fallon, MO	(63531e=
Karen McCay, Member, 331 Blanche Dr., St Charles, Mo	48303-
FUTER PICCOY, PERMET, DI IMMERIE, DE MARIES, MO	202
3. Attached is an original certificate of existence, no more than 90 days old, duly authentic naving custody of records in the jurisdiction under the law of which it is organized. (A phonoceptable. If the certificate is in a foreign language, a translation of the certificate under on must be submitted)	otocopy is not
Kann MC Can	
Signature of an authorized person	
in accordance with section 605.0203, F.S., the execution of this document constitutes an affirm upon under the penalties of perjury the	it the facts stated herein are true.
m aware that any falso information submitted in a document to the Department of State constitutes a third degree felony as provided f	or m 8.81 /.155, F.8.)
KAREN MCCOY	·
Typed or printed name of signee	

# STATE OF MISSOURY



#### Jason Kander Secretary of State

CORPORATION DIVISION CERTIFICATE OF GOOD STANDING

I, JASON KANDER, Secretary of State of the STATE OF MISSOURI, do hereby certify that the records in my office and in my care and custody reveal that

Uma & Karen, LLC LC1360969

was created under the laws of this State on the 5th day of December, 2013, and is active, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 2nd day of September, 2014.

Secretary of State

Certification Number: CERT-09022014-0047