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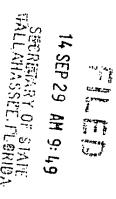
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(Add	dress)	· · · · · · · · · · · · · · · · · · ·
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	· · · · · · · · · · · · · · · · · · ·
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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FLORIDA DEPARTMENT OF STATE Division of Corporations

August 12, 2014

CATHERINE BELL 777 YAMATO RD STE 300 BOCA RATON, FL 33431

SUBJECT: STOLLERY LLC Ref. Number: W14000049216

We have received your document for STOLLERY 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 letters "MGRM" beside the name and address of each managing member and/or the letters "MGR" beside the name and address of each manager listed in the document.

Please return the corrected original and one copy of 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.

Letter Number: 914A00017276

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

www.sunbiz.org

COVER LETTER

Name of Limited Liability Company

TO:

Registration Section Division of Corporations

Stollery, LLC

r icase return an corr	respondence conc	erning this matter	r to the following:			
<u>C</u>	atherine	e Bell				
			Name of Person			
<u> </u>	I Offsho	re Advis	sors			
			Firm/Company			
7	77 Yam	ato Rd.,	Ste. 300			
			Address			
<u>B</u>	oca Raf	ton, FL 3	33431			
_			City/State and Zip Code			
C			avmltd.com			
		E-mail address: (to	avmltd.com be used for future annual re	port notifica	ation)	
For further information	ion concerning th	E-mail address: (to	be used for future annual recall:			
For further information		E-mail address: (to	avmltd.com be used for future annual re		-4431	
For further information	ion concerning th	E-mail address: (to	be used for future annual recall:	544 544		
For further information Cathe	ion concerning the erine Be Name of Co	E-mail address: (to is matter, please of the please of the	be used for future annual resall: at (561 Area Code	544 544	-4431	
For further information Cathe MAILING Division of Registration	on concerning the erine Be Name of Co ADDRESS: Corporations a Section	E-mail address: (to is matter, please of the contact Person	be used for future annual restall: at (561 Area Code ETREET ADDRESS: Division of Corporations Registration Section	544 544	-4431	
For further information Cathe MAILING Division of	non concerning the Prine Be Name of Co ADDRESS: Corporations of Section 327	E-mail address: (to	be used for future annual restall: at (561 Area Code) STREET ADDRESS: Division of Corporations	_) <u>544</u> _) Day	-4431	
Cathe MAILING Division of Registration P.O. Box 63	non concerning the Prine Be Name of Co ADDRESS: Corporations of Section 327	E-mail address: (to is matter, please of the contact Person E Contact Pers	be used for future annual restall: at (561 Area Code ETREET ADDRESS: Division of Corporations Registration Section Clifton Building	_) <u>544</u> _) Day	-4431	
Cathe MAILING Division of Registration P.O. Box 63	Name of Co ADDRESS: Corporations a Section 327 c, FL 32314	E-mail address: (to	be used for future annual restall: at (561 Area Code ETREET ADDRESS: Division of Corporations Registration Section Clifton Building 1661 Executive Center Circallahassee, FL 32301) <u>544</u> Day	-4431	

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:

f name unavailable, enter alternate name adopted for the purpose ability Company," "L.L.C," or "LLC.")	of transacting business in Florida. The alternate name must include "Limited
Nevada	_{3.} 46-4242369
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
Upon qualification	
(Date first transacted busines (See sections 605.0904 & 605.0	ss in Florida, if prior to registration.) 1905, F.S. to determine penalty liability)
777 Yamato Road, Suite 300	
Boca Raton, FL 33431	
	dress of Principal Office)
777 Yamato Road, Suite 300	
Boca Raton, FL 33431	
(M	Mailing Address)
. The name, title or capacity and address of the p	person(s) who has/have authority to manage s/are
Deep Kumar , MANA FER	29 ASS
77 Yamato Road, Suite 300	
loca Raton, FL 33431	
00a ((atol), 1 L 00+0 (

Typed or printed name of signee

Deep Kumar

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

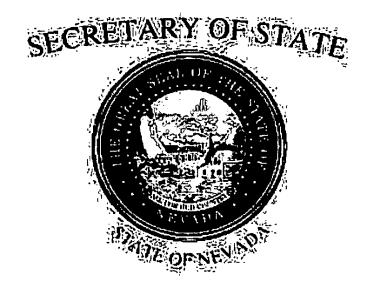
PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

of the Limited Liability Con	npany is:		
e, the alternate to be used in t	the state of Florida is:		
and the Florida street addres	ss of the registered agent and office are:		
Deep Kumar			
<u> </u>	(Name)	•	•
777 Yamato R	d., Ste. 300	My A	
Florida Street Address (P.O. Box NOT ACCEPTABLE)		TAN THE SEL	. ' . b
Boca Raton,	FL 33431	P 29	Special Citate
•	City/State/Zip	AH 9	(gener
pany at the place designated in ent and agree to act in this ca ing to the proper and complete ligations of my position as reg	n this certificate, I hereby accept the appoint pacity. I further agree to comply with the pr e performance of my duties, and I am familia gistered agent as provided for in Chapter 60.	stated limited ment as covisions of all ar with and	Vouer
	e, the alternate to be used in the and the Florida street address Deep Kumar 777 Yamato R Florida Street A Boca Raton, named as registered agent and pany at the place designated in the ent and agree to act in this calling to the proper and complete ligations of my position as registered.	e, the alternate to be used in the state of Florida is: and the Florida street address of the registered agent and office are: Deep Kumar (Name) 777 Yamato Rd., Ste. 300 Florida Street Address (P.O. Box NOT ACCEPTABLE) Boca Raton, 133431 City/State/Zip named as registered agent and to accept service of process for the above so any at the place designated in this certificate, I hereby accept the appointment and agree to act in this capacity. I further agree to comply with the pring to the proper and complete performance of my duties, and I am familia	e, the alternate to be used in the state of Florida is: and the Florida street address of the registered agent and office are: Deep Kumar (Name) 777 Yamato Rd., Ste. 300 Florida Street Address (P.O. Box NOT ACCEPTABLE) Boca Raton, FL City/State/Zip Inamed as registered agent and to accept service of process for the above stated limited anny at the place designated in this certificate, I hereby accept the appointment as ent and agree to act in this capacity. I further agree to comply with the provisions of all ing to the proper and complete performance of my duties, and I am familiar with and ligations of my position as registered agent as provided for in Chapter 605, Florida

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent **Certified Copy (optional)**

\$ 5.00 Certificate of Status (optional)

\$ 30.00



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, STOLLERY, 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 December 5, 2013, and is in good standing in this state.



Certified By: Christine Rakow
Certificate Number: C20140730-4442
You may verify this 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 August 1, 2014.

ROSS MILLER Secretary of State

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