

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : GARDNER BREWER MARTINEZ-MONFORT, P.A.

Account Number : I20060000058 Phone : (813)221-9600

Fax Number : (813)221-9611

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Foreign Limited Liability Company **ISSYTIMMY5, LLC**

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K. SALY EXAMINER OCT 27 2014

10/24/2014 12:14 #598 P.002/005

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COVER LETTER

	tion Section of Corporations		
SUBJECT: IS	SYTIMMY 5, LL	_C	
	Namo	of Limited Liability Company	
The enclosed "App Existence, and che	plication by Foreign Limited Liabi eck are submitted to register the ab	ility Company for Authorizat ove referenced foreign limite	ion to Transact Business in Florida," Certificate of ed liability company to transact business in Florida.
Please return all co	orrespondence concerning this mat	ter to the following:	
(Christopher W.	Brewer	
,		Name of Person	
	Gardner Brewer	Martinez-Mo	onfort PA
		Firm/Company	
4	400 N Ashley D	rive, Suite 11	00
_		Address	
	Tampa FL 3360	2	
		City/State and Zip Code	
C	brewer@gbmm	llaw.com	
	E-mail address: (to be used for future annual rep	ort notification)
For further informa	ation concerning this matter, please	e call:	
Chri	s Brewer	,813	221-9600
	Name of Contact Person	Area Code	Daytime Telephone Number
Division o Registratio P.O. Box	G ADDRESS: of Corporations on Section 6327 ec, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circ Tallahassee, FL 32301	ile
	neck for the following amount 0 Filing Fee \$\square\$ \$\square\$ \$130.00 Filing Certificate of \$\square\$	Fee & \$155.00 Filing	

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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

- ISSYTIMMY5, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")					
f name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited					
iability Company," "L.L.C," or "LLC.")					
Delaware	_{3.} 46-4521730				
(Jurisdiction under the law of which foreign limited liab company is organized)	ility (FEI number, if applicable)				
(Date first transacted (See sections 605.0904	business in Florida, if prior to registration.) & 605.0905, F.S. to determine penalty liability)				
39 Sandpiper Road					
Tampa, FL 33609	7. 2				
	reet Address of Principal Office)				
39 Sandpiper Road					
Tampa, FL 33609	5				
	(Mailing Address)				
,	of the person(s) who has/have authority to manage is/are:				
ramer Tousser, Manager					
aving custody of records in the jurisdiction	ence, no more than 90 days old, duly authenticated by the official under the law of which it is organized. (A photocopy is not nguage, a translation of the certificate under oath of the translator				

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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 nam	e and the Florida street add	dress of the registered agent and office are	TOHOCT 24			
	Christopher 1	W. Brewer	1			
		(Name)	TO SEE			
	400 N Ashle	y Drive Suite 1100	Fig. 1			
		eet Address (P.O. Box NOT ACCEPTABLE)				
	Tampa	_{E1} 33602				
		City/State/Zip	- <u>.</u>			
liability com registered ag	pany at the place designate gent and agree to act in this ting to the proper and com	nt and to accept service of process for the al ed in this certificate, I hereby accept the ap is capacity. I further agree to comply with t plete performance of my duties, and I am fo s registered agent as provided for in Chapt	pointment as the provisions of al amiliar with and			
		R				

\$ 30.00 Certified Copy (optional)

5.00 Certificate of Status (optional)

(((H14000249417 3)))

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ISSYTIMMY5, 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 TWENTY-THIRD DAY OF OCTOBER, A.D. 2014.

5321342 8300

141314197

AUTHENTICATION: 1803272

DATE: 10-23-14

(((H140002494173)))

You may verify this certificate online at corp.delaware.gov/authver.shtml