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To:

Division of Corporations

Fax Number

Fax Number : (850)617-6383

From:

Account Name : AMBAR DIAZ, P.A. Account Number : I20110000016 Phone : (305)476-8100

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

: (305)476-8788

Email Address:

## Foreign Limited Liability Company LATINOS ENVIOS, LLC

| Certificate of Status | 0        |
|-----------------------|----------|
| Certified Copy        | 0        |
| Page Count            | 04       |
| Estimated Charge      | \$125.00 |

DEC 02 2014

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| DEC-1-2014 | 12:53P | FROM: AMBAR | DIAZ,P.A |
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**COVER LETTER** 

TO: Registration Section Division of Corporations

LATINOS ENVIOS, LLC SUBJECT: Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check 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:

| ABELARDO FERNANDEZ   |   |
|--|---|
| Name of Person   |   |
|  |   |
| Firm/Company   |   |
| 1255 W 46 ST SUITE 14  | Fig. 3                                  |
| Address  |   |
| MIAMI FL 33012   | 一部 号一                                   |
| City/State and Zip Code  | 1 |
| afernandez700@yahoo.com  |   |
| E-mail address: (to be used for future annual report notification) | (P)                                     |
|  | 1. C1                                   |

For further information concerning this matter, please call:

Ambar Diaz Name of Contact Person

MAILING ADDRESS: Division of Corporations

Registration Section P.O. Box 6327 Tallahassee, FL 32314

STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Enclosed is a check for the following amount:

■ \$125.00 Filing Fee □ \$130.00 Filing Fee &

Certificate of Status

□ \$155.00 Filing Fee & Certified Copy

\$160.00 Filing Fee, Certificate of Status & Certified Copy

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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 FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The  | alternate name must include "  |
|--|--|
| Nevada  Nevada  NA   |  |
|  | er, if applicable)   |
| 10/01/2014   |  |
| (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability  | )  |
| 1255 W 46 ST, Suite 14   | 三百万 子  |
| Hialeah, FL 33012  | 書出るこ   |
| (Street Address of Principal Office)   |  |
| Same as above  | <u> </u>   |
|  | 55 <b>9</b>  |
| (Mailing Address)  |  |
| The name, title or capacity and address of the person(s) who has/have author   |  |
| Abelardo Fernandez  Attached is an original certificate of existence, no more than 90 days old, duly aving custody of records in the jurisdiction under the law of which it is organize exptable. If the certificate is in a foreign language, a translation of the certificate is the submitted)  | y authenticated by the code. (A photocopy is no  |
| Attached is an original certificate of existence, no more than 90 days old, duly aving custody of records in the jurisdiction under the law of which it is organize ceptable. If the certificate is in a foreign language, a translation of the certificate  | y authenticated by the o   |
| Abelardo Fernandez  Attached is an original certificate of existence, no more than 90 days old, duly aving custody of records in the jurisdiction under the law of which it is organize coeptable. If the certificate is in a foreign language, a translation of the certificate   | y authenticated by the code. (A photocopy is not the under oath of the traces of perjury that the facts stated h                   |
| Attached is an original certificate of existence, no more than 90 days old, duly ving custody of records in the jurisdiction under the law of which it is organize ceptable. If the certificate is in a foreign language, a translation of the certificate is to be submitted)  Signature of an authorized person accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penaltic | y authenticated by the ced. (A photocopy is not the under oath of the transfer of the transfer of perjury that the facts stated to |

## 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 Liab<br>Envios LLC | • • •  |                      |                |                    |
|-----------------|-----------------------------------|--|----------------------|----------------|--------------------|
| If unavailable, | the alternate to be               | used in the state of Florida is:                   |                      |                |                    |
| 2. The name a   | nd the Florida stre               | et address of the registered agent and office are: |                      |                | _                  |
|                 | Abelardo                          | Fernandez  |                      | 030            |                    |
|                 |                                   | (Name)   |                      | <del>( )</del> |                    |
|                 | 1255 W 4                          | 6 ST, Suite 14                                     |                      | - 27           | 1<br>10 10 10<br>1 |
|                 | Flori                             | da Street Address (P.O. Box NOT ACCEPTABLE)        |                      | ري             |                    |
|                 | Hialeah                           | FL 33012   | 50-1-1<br>1-2<br>1-8 | CT<br>CT       |                    |
|                 |                                   | City/State/Zip                                     |                      |                |                    |

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.

(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)





## CERTIFICATE OF EXISTENCE (INCLUDING AMENDMENTS)

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, LATINOS ENVIOS 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 12, 2003, and is in good standing in this state.

I further certify, that the above limited liability company has Articles of Organization and no amendments on file in this office as of the date of this certificate.

Certified By: Heather Christensen Certificate Number: C20141029-2538 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 October 30, 2014.

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ROSS MILLER Secretary of State