Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600 Fax Number : (323)962-3989

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

Email Address:

Foreign Limited Liability Company GAGE CONSULTING LLC

Certificate of Status	0
Certified Copy	1
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Corporate Filing Menu

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COVER LETTER

Division of Corporations		·				
SUBJECT: GAGE CO	NSULTING	LLC				
	Name of Limite	d Liability Company				
The enclosed "Application by Foreign Existence, and check are submitted to	Limited Liability Com register the above refer	pany for Authorization enced foreign limited li	to Transact Business in Florida," ability company to transact busin	Certificate of less in Florida		
Please return all correspondence conc	eming this matter to the	following:				
	Ime	lda Vasquez				
······································	N	ame of Person	<u> </u>			
	Legalz	zoom.com, Inc.				
	Firm/Company					
	100 W. Br	oadway Suite 100)			
		Address				
	Glendale, CA 91210					
	-	tate and Zip Code				
		onsultinglic@gmai				
For further information concerning thi	•	i toi tuture asutai tepott i	ionneacion)			
lmelda Vasquez	•	323 9	62-8600			
Name of Co	ntact Person	Area Code	Daytime Telephone Number			
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	Division Registra Clifton 2661 Ex	T ADDRESS: n of Corporations ation Section Building tecutive Center Circle ssee, FL 32301				
	wing amount: \$130.00 Filing Fee & Certificate of Status	S155.00 Filing For Certified Copy	c & \$\Bigcup \$160.00 Filing Fee, Ce of Status & Certified C			

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:

1. GAGE CONSULTING LLC	
(Name of Foreign Limited Liability Company; must include "Limited Liability Company	y," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida.' Liability Company," "L.L.C," or "L.L.C,")	The alternate name must include "Limited
_{2.} Arizona _{3.} 47-1336924	·
	mber, if applicable)
4 11/15/2014	
(Date first transacted business in Florida, if prior to registration. (See sections 605.0904 & 605.0905, F.S. to determine penalty liab	lilty)
_{5.} 9506 Harpender Way, Tampa, FL 33626	£0, 1
	Alley Co. T. C. T.
(Street Address of Principal Office)	<i>ن، سُ</i> رِّ
6.	95 25
	500
(Mailing Address)	
7. The name, title or capacity and address of the person(s) who has/have aut	hority to manage is/are:
•	
Anna Steele Krieg, Manager, 9506 Harpender Way	, Tampa, FL 33020
Kate Frances Murray, Manager, 9506 Harpender Way	, Tampa, FL 33626
8. Attached is an original certificate of existence, no more than 90 days old,	
having custody of records in the jurisdiction under the law of which it is orga acceptable. If the certificate is in a foreign language, a translation of the certi	
must be submitted)	richte ditae, char et 210 densimor
- Jac 101V	
Signature of an authorized person (In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the pears aware that any false information submitted in a document to the Department of State constitutes a third degree	nalties of perjury that the facts stated herein are true, felony as provided for in s.817.155, F.S.)
Kate Frances Murray	
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.

OPPENDING STATE OF ELODIDA CEMENTAL CAPAGE OF ELODIDA		
AGENT IN THE STATE OF FLOR	IDA.	1. F. M.
1. The name of the Limited Liabilit	y Company is:	The total of the second
GAGE CONSULTIN	• •	
If unavailable, the alternate to be us	ed in the state of Florida is:	The flower of
2. The name and the Florida street	address of the registered agent and office	are:
Kate Murra	У	
	(Name)	
9506 Harpe	ender Way	
Florida	Street Address (P.O. Box NOT ACCEPTABLE)	1000
Tamna	33826	

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.

City/State/Zip

(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Derignation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)







Office of the CORPORATION COMMISSION

CERTIFICATE OF GOOD STANDING

To all to whom these presents shall come, greeting:

I, Jodi A. Jerich, Executive Director of the Arizona Corporation Commission, do hereby certify that

GAGE CONSULTING LLC

a domestic limited liability company organized under the laws of the State of Arizona, did organize on the 1st day of July 2014.

I further certify that according to the records of the Arizona Corporation Commission, as of the date set forth hereunder, the said limited liability company is not administratively dissolved for failure to comply with the provisions of A.R.S. section 29-601 et seq., the Arizona Limited Liability Company Act; and that the said limited liability company has not filled Articles of Termination as of the date of this certificate.

This certificate relates only to the legal existence of the above named entity as of the date issued. This certificate is not to be construed as an endorsement, recommendation, or notice of approval of the entity's condition or business activities and practices.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the official seal of the Arizona Corporation Commission. Done at Phoenix, the Capital, this 4th Day of November, 2014, A. D.



Josi A. Jerich, Executive Director

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