

2014-12-03 14:0

Boyer Law Firm 9043713935 > 850-617-6381

P 3/7

M14000008700

Transmission Log

Boyer Law Firm

Tuesday, 2014-12-02 13:23

9043713935

Date	Time	Type	Job #	Length	Speed	Fax Name/Number	Pgs	Status
2014-12-02	13:21	SCAN	00408	2:02	14400	850-617-6381	5	OK -- V.17 BR30

12/2/2014

Division of Corporations

Florida Department of State Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H14000277736 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From:
Account Name : BOYER LAW FIRM, P.L.
Account Number : 120100000071
Phone : (904)236-5317
Fax Number : (904)371-3935

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

Email Address: Office@BoyerLawFirm.com

Foreign Limited Liability Company HighLuxLife, LLC

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

Electronic Filing Menu

Corporate Filing Menu

Help

<https://files.sunbiz.org/scripts/efilecov.asp>

11

FILED

2014 DEC -3 AM 10:45

CLERK OF STATE
TALLAHASSEE, FLORIDA

W. Culligan

DEC - 8 2014

2014-12-03 14:03

Boyer Law Firm 9043713935 >> 850-617-6381

P 1/7



December 3, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

BOYER LAW FIRM

SUBJECT: HIGHLUXLIFE, LLC
REF: W14000071965

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

Please return 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.

Neysa Culligan
Regulatory Specialist II

FAX Aud. #: H14000277736
Letter Number: 314A00025374

RECEIVED
14 DEC -3 PM 3:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HIGHLUXLIFE, LLC

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:

Francis M. Boyer

Name of Person

Boyer Law Firm, P.L.

Firm/Company

9471 Baymadows Road, Suite 404

Address

Jacksonville, FL 32256

City/State and Zip Code

Office@BoyerLawFirm.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Francis M. Boyer

Name of Contact Person

at (904)

Area Code

236-5317

Daytime Telephone Number

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

**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:

HIGHLUXLIFE, 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:

Boyer Law Firm, P.L.

(Name)

9471 Baymeadows Road, Suite 404

Florida Street Address (P.O. Box NOT ACCEPTABLE)

Jacksonville

FL 32256

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)

FILED
2014 DEC -3 AM 10:45
CLERK OF STATE
TALLAHASSEE, FLORIDA

Commonwealth of Virginia



State Corporation Commission

CERTIFICATE OF FACT

I Certify the Following from the Records of the Commission:

That HighLuxLife LLC is duly organized as a limited liability company under the law of the Commonwealth of Virginia;

That the date of its organization is September 30, 2014; and

That the limited liability company is in existence in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.



*Signed and Sealed at Richmond on this Date:
December 3, 2014*

Joel H. Peck

Joel H. Peck, Clerk of the Commission