M14000009049

(Re	questor's Name)			
(Ad	dress)			
(Ád	dress)	<u>.</u>		
(Cit	ry/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Do	ocument Number)			
Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer:			

Office Use Only



400267125924

12/15/14--01039--001 **130.00

14 DEC 15 AM 7: 25
SECRETARY OF STATE
ALL AHASSEE, FLORID.

Listings GER 1 a 7974

COVER LETTER

•	ation Section n of Corporations	
SUBJECT:	Yulista Integrated Solutions, LLC	
	Name of Limited Liability Company	
	pplication by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate neck are submitted to register the above referenced foreign limited liability company to transact business in Flori	
Please return all c	correspondence concerning this matter to the following:	
	Lena Delgado	
-	Name of Person	
	Yulista Holding, LLC	
-	Firm/Company	
	3800 Centerpoint Drive, Suite 520	
<u>-</u>	Address	
	Anchorage, Alaska 99503	
-	City/State and Zip Code	
	Ldelgado@yulista.com	
_	E-mail address: (to be used for future annual report notification)	
For further inform	mation concerning this matter, please call:	
Len	na Delgado _{at (} 907 ₎ 275-2917	
	Name of Contact Person Area Code Daytime Telephone Number	
Division Registrat P.O. Box	NG ADDRESS: of Corporations ation Section ox 6327 Seee, FL 32314 See, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a c	check for the following amount: \$130.00 Filing Fee & \$155.00 Filing Fee & Certificate of Status Certificate of Status Certified Copy \$160.00 Filing Fee, Certificate of Status & Certified Copy	

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	Yulis (Name of Foreign Limited Liability Com	ta Integrated Solutio		or "LLC.")	
	ailable, enter alternate name adopted for pany," "L.L.C," or "LLC.")	the purpose of transacting busines			'Limited
2.	ALASKA	3	47-19422		
(Jurisdiction company i	n under the law of which foreign limited is organized)	liability	(FEI number, if appli	icable)	
f				-	
	(Date first transs (See sections 605.0	cted business in Florida, if prior t 904 & 605.0905, F.S. to determin	o registration.) e penalty liability)		
5,		<u> </u>			
	3800	Centerpoint Driv			
	0000	(Street Address of Principal Offi			
j,	3800	Centerpoint Driv	e, Suite 520		
	` A	nchorage, Alask	a 99503	,	
		(Mailing Address)		AL SE	
7. The na	me, title or capacity and addres	ss of the person(s) who ha	s/have authority to r	nanage is/af	11 g 1g
	Darrel	l Harrison, Presid	dent	SVF EVE	el description
· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·		SF OF A	
	0311	Discovery Drive i	400		<u></u>
	Hunts	ville, Alabama 35	806	7: 2 SIA LOR	*15,54.8 **
					 -
Attached	l is an original certificate of ex	istence, no more than 90	days old, duly auther	nticated by the	official
	tody of records in the jurisdicti				
-	If the certificate is in a foreign	n language, a translation o	of the certificate unde	er oath of the tr	anslator
ust be sul	bmitted)	,			
	Hair	el L to	thijon		
i accordance vi	Si with section 605.0203, F.S., the execution of t may false information submitted in a document	gnature of an authorized in a stimute an affirmation	on under the penalties of perju	ry that the facts stated ided for in s.817.155, F	herein are true F.S.)
	-	Darrell Harrison	•		
	Тур	ed or printed name of sig	nee		

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	of the Limited Liability C	_		
	Yulista Int	egrated Solution	s, LLC	·
If unavailable,	the alternate to be used i	n the state of Florida is:		
2. The name a	and the Florida street add	ress of the registered agent a	and office are:	
	Corpora	tion Service Cor	npany	
		(Name)		
	1201 Hays S	treet		
	Florida Stree	et Address (P.O. Box NOT ACCEP	TABLE)	
	Tallahassee,	FL	32301	
Transit Land	J	City/State/Zip		FCRETA
liability compa registered agei	my at the place designated nt and agree to act in this	and to accept service of proc d in this cer tificat e, I hereby capacity. I further agree to lete performance of my dutie	accept the appointm copeply with the pro	ent as visions affall
		registered agent as provided		
		(Signature)		

\$ 100.00 Filing Fee for Application

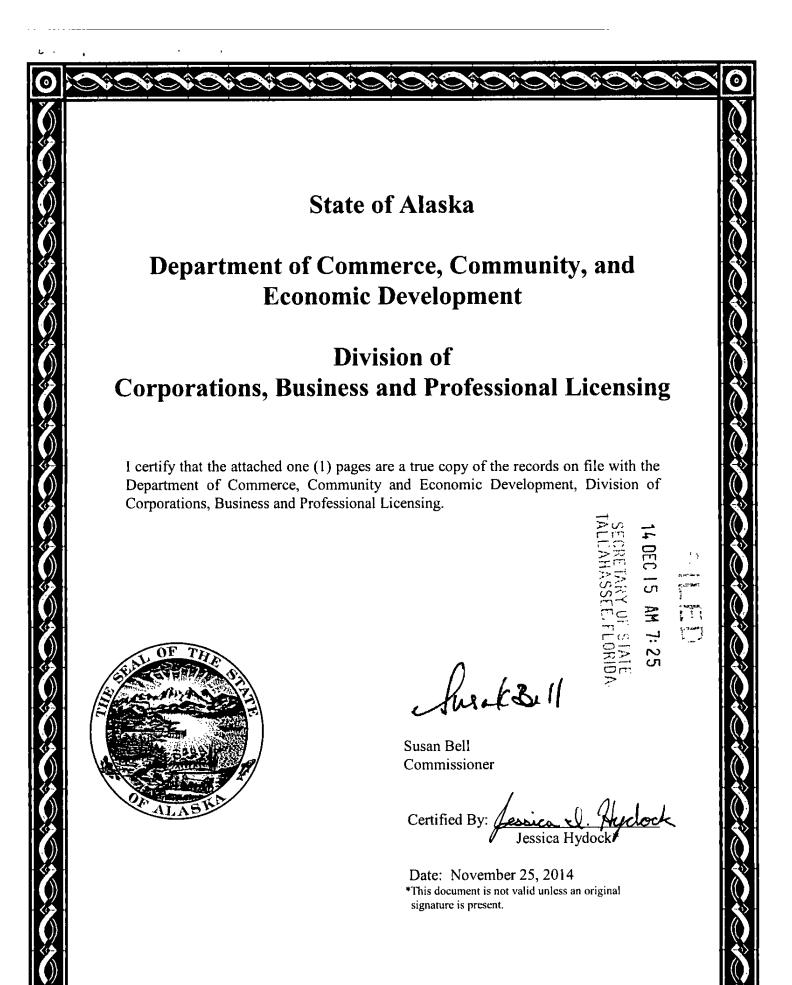
\$ 25.00 \$ 30.00

5.00

Designation of Registered Agent

Certificate of Status (optional)

Certified Copy (optional)



Alaska Entity #10023722

State of Alaska

Department of Commerce, Community and Economic Development Corporations, Business and Professional Licensing

Certificate of Compliance

The undersigned, as Commissioner of Commerce, Community and Economic Development of the State of Alaska, and custodian of corporation records for said state, hereby issues a Certificate of Compliance for:

Yulista Integrated Solutions, LLC

This entity was formed on September 25, 2014 and is in good standing. This entity has filed all biennial reports and fees due at this time.

No information is available in this office on the financial condition, business activity or practices of this corporation.



IN TESTIMONY WHEREOF, I execute the certificate and affix the Great Seal of the State of Alaska effective **November 25, 2014**.

Purak Bell

Susan K. Bell Commissioner