

MIS 000 00005 F

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

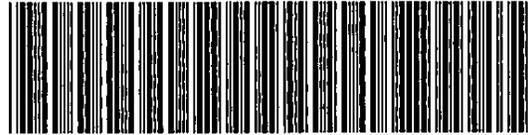
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600267128556

12/05/14--01006--009 **160.00

15 JAN -2 AM 7:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

3. Shivers JAN 05 2015

1/14



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 11, 2014

STEPHEN PETTY
1701 E ATLANTIC BLVD SUITE 5
POMPANO BEACH, FL 33060

SUBJECT: DELEXA, L.L.C.
Ref. Number: W14000073848

We have received your document for DELEXA, L.L.C. and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

Please return the corrected original and one copy of 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.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 914A00026159

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Delexa, L.L.C.

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:

Stephen Petty

Name of Person

EES Group, Inc.

Firm/Company

1701 E. Atlantic Blvd., Suite 5

Address

Pompano Beach, FL 33060

City/State and Zip Code

spetty@eesinc.cc

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

For further information concerning this matter, please call:

Stephen Petty

Name of Contact Person

at (**754**)

Area Code

220-8844

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

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A
FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. Delexa, L.L.C.,
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

Delexa5, L.L.C.,
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Ohio 3. 46-2154590
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. December 1, 2014
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 1701 E. Atlantic Blvd., Suite 5
Pompano Beach, FL 33060
(Street Address of Principal Office)

6. 1701 E. Atlantic Blvd., Suite 5
Pompano Beach, FL 33060
(Mailing Address)

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are
Stephen Petty, AMBR
510 N. Ocean Blvd., #505
Pompano Beach, FL 33062

FILED
15 JAN - 2: AM 7: 27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

Stephen Petty
Signature of an authorized person

(In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Stephen Petty
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.

1. The name of the Limited Liability Company is:

Delexa, L.L.C.

If unavailable, the alternate to be used in the state of Florida is:

Delexa5, L.L.C.

2. The name and the Florida street address of the registered agent and office are:

Stephen Petty

(Name)

510 N. Ocean Blvd., #505

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

Pompano Beach

FL 33062

City/State/Zip

15 JAN - 2 AM 7:27
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

Stephen Petty
(Signature)

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

UNITED STATES OF AMERICA
STATE OF OHIO
OFFICE OF THE SECRETARY OF STATE

I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show DELEXA, LLC, an Ohio Limited Liability Company, Registration Number 1456323, was organized within the State of Ohio on April 13, 2004, is currently in FULL FORCE AND EFFECT upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 9th day of October, A.D. 2011

Jon Husted

Ohio Secretary of State

FILED
15 JAN 2011 AM 7:27
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Validation Number: 201428201823