number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : NORTHWEST REGISTERED AGENT LLC

Account Number : 120090000081 .

: (509)768-2249

Phone Fax Number

: (855)330-1010

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

Email Address:

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Foreign Limited Liability Company EVER ENTERPRISE LLC

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

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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 BY ISINESS IN THE STATE OF FLORIDA.

FUREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1, EVER ENTERPRISE LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LI.C.")
EVER ENTERPRISE GROUP, LLC
(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. WYOMING 3. N/A
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4. N/A
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 3030 N. ROCKY POINT DRIVE, SUITE 150A, TAMPA, FL 33607
Por S
(Street Address of Principal Office)
6. 3030 N. ROCKY POINT DRIVE, SUITE 150A, TAMPA, FL 33602 -
<u> </u>
(Mailing Address)
TO strained
7. The name, title or capacity and address of the person(s) who has/have authority to manage share:
LUIS E FLORES, MEMBER
3030 N. ROCKY POINT DRIVE, SUITE 150A, TAMPA, FL 33607
3030 N. NOOKT FOINT DIKIVE, SOITE 130A, TAINFA, FE 33007
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)
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.
am aware that any fulse information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)
DAN KEEN

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUAN'T 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.

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Ι.	11110	Hame	or the	Limiteo	Liability	Company is:
- •			~		~	

EVER ENTERPRISE LLC

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

EVER ENTERPRISE GROUP LLC

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

Northwest Registered Agent LLC	A.S.	2015
(Name)	1 ()	
3030 N. Rocky Point Dr., STE 150A	SE P	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	FE FL	ा ।
Tampa 33607	22 A	-
City/State/7in		<i>)</i>

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.

Dan Keen - Manager

(Signature)

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

FICTITIOUS NAME RESOLUTION

I. L. Ernesto Flores, Manager of Ever Enterprise LLC, a Wyoming Limited Liability Company, authorize use of the fictitious name Ever Enterprise Group, LLC, for use in the State of Florida.

Dated this 19th day of January, 2015;

L. Ernesto Flores, Manager of Ever Enterprise LLC

2015 JAN 20 AM 8: 35
SECRETARY OF STATE
TALL ANASSEE OF STATE

STATE OF WYOMING Office of the Secretary of State

i, EDWARD F. MURRAY, III, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

EVER ENTERPRISE LLC

is a

Limited Liability Company

formed or qualified under the laws of Wyoming did on January 8, 2015, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number 2015-000678786.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 14th day of January, 2015 at 10:07 AM. This certificate is assigned 017010111.



Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.