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APR 03 2015

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Proceed-11, LLC	
Name of Limited Liability Company	
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida." Certif Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in	
Please return all correspondence concerning this matter to the following:	
Hillary H. Hughes	
Name of Person	
Garvey Schubert Barer	
Firm/Company	
100 Wall St., 20th Floor	
Address	
New York, New York 10005 ≥ ≥	
City/State and Zip Code	7
City/State and Zip Code corporatedocs@gsblaw.com	DEC.
1mail address. (to be used for future annual report notification)	r
For further information concerning this matter, please call:	
Hillary H. Hughes at 212 965-4527	* ** *********************************
Name of Contact Person Area Code Daytime Telephone Number	
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, Fl. 323142661 Executive Center CircleTallahassee, Fl. 32301	
Enclosed is a check for the following amount: Status Enclosed is a check for the following amount: Status	.e

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. Proceed-11, LLC
(Name of Foreign Limited Liability Company: must include "Limited Liability Company," "L.L.C" or "Lt.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 "LL.C.")
2 Delaware 3 47-3036101
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. (Data first transported business in Elevida, if prior to registration.)
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. c/o Vstarr Interiors, LLC, 4191 Main Street
Jupiter, Florida 33458
(Street Address of Principal Office) 6. c/o Vstarr Interiors, LLC, 4191 Main Street
Jupiter, Florida 33452 ∰ ∰ ∰ (Mailing Address)
(Mailing Address) (Mailing Address) 7. The name title or conseity and address of the person(s) who has have authority to manage declarate.
7. The name, title or capacity and address of the person(s) who has/have authority to manage/is/are:
Managing Member - Venus Williams
Address - c/o Vstarr Interiors, LLC 물로 표 으
4191 Main Street, Jupiter, Florida 33458
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)
Janua Millors
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 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.) Venus Williams
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.

If unavailab	ole, the alternate to	be used in the	state of Florida is:		
2. The nam	e and the Florida st	reet address o	of the registered agent and office are:	:	
	Vstarr I	nteriors	, LLC		
	(Name)				
	4191 Main Street				
	177	orida Street Add	ress (P.O. Box NOT ACCEPTABLE)	16888888888888888888888888888888888888	
	Jupiter		33458	2015 MAR 6 PM : 32	
			City/State/Zip	— 55 3 36 3 37 3	
liability con registered a statutes rela	ipany at the place d gent and agree to a iting to the proper a	esignated in the ct in this capa nd complete p	o accept service of process for the ab his certificate, I hereby accept the app wity. I further agree to comply with to performance of my duties, and I am fa tered agent as provided for in Chapto	pointment as he provisions of all miliar with and	
		V040 m/	1 galos		
		(Signa	ture)		
		\$ 100.00 \$ 25.00 \$ 30.00	Filing Fee for Application Designation of Registered Agent Certified Copy (optional)		

\$ 5.00

Certificate of Status (optional)



PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "PROCEED-11, LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING

AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE

SHOW, AS OF THE TWENTY-EIGHTH DAY OF FEBRUARY, A.D. 2015.

5680065 8300

150224016

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AUTHENTY CATION: 2158981

DATE: 02-28-15

You may verify this certificate online at corp.delaware.gov/authver.shtml