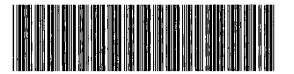
M15000007573

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Name)
(Do	ocument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to Filing Officer:		

Office Use Only



800272353838

05/04/15--01006--001 **130.00



A SHAVERS MAY 0 7 PRIS

COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT: Orbund 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:				
Arif Joarder				
Name of Person				
Orbund LLC				
Firm/Company				
12537 S. Lincoln Street				
Address				
Olathe, KS 66061				
City/State and Zip Code				
arif@orbund.com				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Arif Joarder 913 636-4497				
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: \$\Bigsize \text{\$125.00 Filing Fee} \text{ \$\Bigsize \$\$ \$130.00 Filing Fee & Certificate of Status}\$\$ Certificate of Status \$\Bigsize \text{\$155.00 Filing Fee & Certified Copy}\$\$ \$\Bigsize \text{\$\$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:

FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. Orbund LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
Orbund Systems 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.} State of Kansas 3. 481260014
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
_{4.} None
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
7300 W. 110th Street, Suite 700
Overland Park, KS 66210
(Street Address of Principal Office)
_{6.} 12537 S. Lincoln Street
Olathe, KS 66061
(Mailing Address)
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/ares
Arif Joarder, President, 12537 S. Lincoln Street, Olathe, KS 66061
20 A TT
≥ · · · · · · · · · · · · · · · · · · ·
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 translato
must be submitted)
Air dr
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 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.)
Arif Joarder

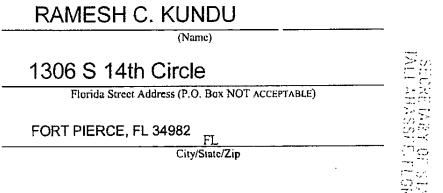
Typed or printed name of signee

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

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



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)

STATE OF KANSAS OFFICE OF SECRETARY OF STATE KRIS W: KOBACH

I, KRIS W. KOBACH, Secretary of State of the state of Kansas, do hereby certify, that according to the records of this office.

Business Entity ID Number: 3324431

Entity Name: ORBUND LLC

Entity Type: DOM: LTD LIABILITY COMPANY

State of Organization: KS

Resident Agent: ARIF JOARDER

Registered Office: 12537 S LINCOLN, OLATHE, KS 66061

was filed in this office on May 21, 2002, and is in good standing, having fully complied with all requirements of this office.

No information is available from this office regarding the financial condition, business activity or practices of this entity.

In testimony whereof I execute this certificate and affix the seal of the Secretary of State of the state of Kansas on this day of April 28, 2015

KRIS W. KOBACH SECRETARY OF STATE

Certificate ID: 660786 - To verify the validity of this certificate please visit https://www.kansas.gov/bess/flow/validate and enter the certificate ID number.