# MU5000003761

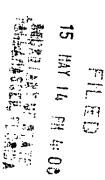
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

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M. MELIGAN EXAMINER

MAY 14 2015

#### **COVER LETTER**

TO:	Registration Section Division of Corporations	
SUBJI	stainless design llc	
5000	Name of Limited Liability Company	
	osed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Ce e, and check are submitted to register the above referenced foreign limited liability company to transact business	
Please	rum all correspondence concerning this matter to the following:	
	gary thayer	
	Name of Person	
	stainless design llc	
	Firm/Company	
	1981 briarwood st	
	Address	
	dunedin fl 34698	
	City/State and Zip Code	
	stainlessdesignllc@gmail.com	
	E-mail address: (to be used for future annual report notification)	
For fur	r information concerning this matter, please call:	
	gary thayer 727 432-9353	
	Name of Contact Person Area Code Daytime Telephone Number	
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Callahassee, FL 32314  STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
Enclose	is a check for the following amount:  \$\begin{align*} \text{125.00 Filing Fee} &  \$\subset\$	icate

## 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 TOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

	Iternate name adopted for the purpose of transacting business in Florida. The	alternate name must include "Limited
Liability Company," "L.L.C.	•	
Wyoming	3. 47-3990315	** * 1
(Jurisdiction under the law company is organized)	of which foreign limited liability (FEI number,	if applicable)
	(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability	y)
5. 1621 Central Ave		
Cheyenne, Wyoming	82001	
	(Street Address of Principal Office)	•
6. 1621 Central Ave		
Chevenne, Wyoming	92	Programme and the second secon
-moyeman,yemang	8ZOO( (Mailing Address)	
	on the first transfer of the second life	
7. Name and street addre	ss of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)	कुरा तुनु <u>चित्र</u>
Name:	Gary Thayer	
Office Address:	1981 Briarwood st	
	dunedin , Florida 346	98 <del>- " C#</del>
		(Zip code)
this application, I hereby with the provisions of all the obligations of my pos	accept the appointment of registered agent and agree to act in this statutes relative to the proper and complete performance of my dutition as registered agent.	capacity. I juriner agree to compty ies, and I am familiar with and accept
	(Registered agent's signature)	
_	(Registered agent's signature) acity and/address of the person(s) who has/have authority to manage i	is/are:
8. The name, title or cap Gary Thayer 1981 Briarwood st	$\chi///$	is/are:
Gary Thayer	acity and/addiess of the person(s) who has/have authority to manage i	is/are:

## 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,

## Stainless Design LLC

is a

### **Limited Liability Company**

formed or qualified under the laws of Wyoming did on **May 12, 2015**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2015-000686732**.

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 13th day of May, 2015 at 12:43 PM. This certificate is assigned 017797028.



Secretary of Spate

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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.