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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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T L C C 15 JUN -3 AM 7: 22 SECRETARY OF STATE

Jun - 4 2015

T. HAMPTON

COVER LETTER

TO:

Registration Section

Division of Corporation	ns
SUBJECT:	ELEAD,LLC
	Name of Limited Liability Company
	reign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of ed to register the above referenced foreign limited liability company to transact business in Florida
Please return all correspondence	concerning this matter to the following:
	Karen Vega
	Name of Person
	Elead LLC
<u> </u>	Firm/Company
	8724 SW 72nd ST STE 215
 	Address
	Miami, FL 33173
	City/State and Zip Code
	Baggermaid@hotmail.com
· · · · · · · · · · · · · · · · · · ·	E-mail address: (to be used for future annual report notification)
For further information concerning	g this matter, please call:
Karen Veg	a 305 753-1243
Name o	of Contact Person Area Code Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for the	
□ \$125.00 Filing Fee	☐ \$130.00 Filing Fee & ☐ \$155.00 Filing Fee & ■ \$160.00 Filing Fee, Certificate Certificate of Status Certified Copy of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 19, 2015

KAREN VEGA 8724 SW 72ND ST STE 215 MIAMI, FL 33173

SUBJECT: ELEAD LLC

Ref. Number: W15000035481

RECEIVED

15 JUN -3 PM 3: 54

SECRETARY OF STATE
SECRETARY SEEF, FLORIDE

We have received your document for ELEAD LLC and your check(s) totaling \$160.00. However, the document has not been filed and is being retained in this office for the following:

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

Please return 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.

Tammy Hampton Regulatory Specialist III

Letter Number: 915A00010532

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		<i>OMPANYTOTRANSACT BUSINE</i> Elead LLC		
	(Name of Foreign Limited	Liability Company; must include "Limite	ed Liability Company," "L.L.C.	," or "LLC.")
	e unavailable, enter alternate nam y Company," "L.L.C," or "LLC."	ne adopted for the purpose of transacting l	business in Florida. The alterna	te name must include "Limited
2	Delaware	2	47-3373298	
2. (Juris	sdiction under the law of which for any is organized)	oreign limited liability 3,	(FEI number, if ap	
4.		04/30/2015		
4	(D (See :	eate first transacted business in Florida, if sections 605.0904 & 605.0905, F.S. to de	prior to registration.)	ASE S
5.	(3-11)	8724 SW 72nd ST		CRET JUN 1
J		Miami, FL 331		SSEE II
		(Street Address of Princip 8724 SW 72nd ST	•	70 1
6		Miami, FL 331	·	: 22 TATE ORIDA
Ra	mses Vega CEC	and address of the person(s) w 8724 SW 72nd ST	STE 215 Mia,	FL 33173
Kar	en Vega CFO	8724 SW 72nd ST	STE 215 Mia, F	FL 33173
having accept must l	g custody of records in that table. If the certificate is be submitted) dance with section 605.0203, F.S., the custom se	ficate of existence, no more that he jurisdiction under the law of in a foreign language, a translation of this document constitutes an aid in a document to the Department of State co	which it is organized. (attion of the certificate unition of the certificate unitized person	A photocopy is not ider oath of the translator
		Karen Vega		
		Typed or printed name of	ofsionee	

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 o		iability Company is:	
If unavailable,	the alternate to	be used in the state of Florida is:	
2. The name a	nd the Florida s	street address of the registered agent and office are:	-
		Karen Vega	_
		724 SW 72nd ST STE 215 lorida Street Address (P.O. Box NOT ACCEPTABLE)	
	Miami	_{FL} 33173	_
		City/State/Zip	

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)

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "ELEAD 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 THIRD DAY OF JUNE, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ELEAD LLC" WAS FORMED ON THE TENTH DAY OF MARCH, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5707486 8300

150874189

Jeffrey W. Bullock, Secretary of State

AUTHENT\CATION: 2433392

DATE: 06-03-15

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