

M15000006080

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

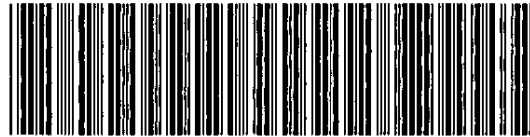
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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W15-45976

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AUG 03 2015  
- BRUCE



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 21, 2015

MARSHA SIHA  
134 VINTAGE PARK BLVD A-50  
HOUSTON, TX 77070

SUBJECT: UNIVERSAL TRANSLATION SERVICE LLC  
TRANSLATION SERVICE USA LLC  
Ref. Number: W15000045976

UNIVERSAL

We have received your document for UNIVERSAL TRANSLATION SERVICE LLC UNIVERSALTRANSLATIONSERVICEUSALLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please accept our apology for failing to mention this in our previous letter.

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

Please return your document, along with 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.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 115A00015202

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 8, 2015

MARSHA SIHA  
134 VINTAGE PARK BLVD A-50  
HOUSTON, TX 77070

SUBJECT: UNIVERSAL TRANSLATION SERVICE LLC  
TRANSLATION SERVICE USA LLC  
Ref. Number: W15000045976

UNIVERSAL

We have received your document for UNIVERSAL TRANSLATION SERVICE LLC. UNIVERSALTRANSLATIONSERVICEUSALLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with 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.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 115A00014236

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: **UNIVERSAL TRANSLATION SERVICE 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:

**MARSHA SIHA**

Name of Person

**INCFILE.COM LLC**

Firm/Company

**134 VINTAGE PARK BLVD A-50**

Address

**HOUSTON TX 77070**

City/State and Zip Code

**ANITA@WAPATRANSLATIONS.COM**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**MARSHA SIHA**

Name of Contact Person

at **888** **462-3453**

Area Code

Daytime Telephone Number

**MAILING ADDRESS:**

Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**

Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA

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Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy

☐ \$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:

1. **UNIVERSAL TRANSLATION SERVICE LLC**

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

**UNIVERSAL TRANSLATION SERVICE USA 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. **DELAWARE**

(Jurisdiction under the law of which foreign limited liability company is organized)

3. \_\_\_\_\_

(FEI number, if applicable)

4. \_\_\_\_\_

(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. **19333 COLLINS AV UNIT 308**

**SUNNY ISLE, FL 33160**

(Street Address of Principal Office)

6. **19333 COLLINS AV UNIT 308**

**SUNNY ISLE, FL 33160**

(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: **LEGALINC CORPORATE SERVICES INC.**

Office Address: **5237 SUMMERLIN COMMONS SUITE 400**

**FORT MYERS**

(City)

, Florida **33907**

(Zip code)

Registered agent's acceptance:

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

**ANTONIUS JACOBUS HOFFMANN - 19333 COLLINS AV UNIT 308**

**SUNNY ISLE, FL 33160 — Member**

9. Attached is a 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. (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

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I 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.

**ANTONIUS JACOBUS HOFFMANN**

Typed or printed name of signee

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2015 JUL 31 P 3:11

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# Delaware

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## *The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "UNIVERSAL TRANSLATION SERVICE 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 THIRTIETH DAY OF JUNE, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "UNIVERSAL TRANSLATION SERVICE LLC" WAS FORMED ON THE SEVENTH DAY OF DECEMBER, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

4761841 8300

150994798

You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)



  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 2516566

DATE: 06-30-15