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(Requestor's Name)						
(Ad	ldress)					
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(Cit	y/State/Zip/Phone ≴	<i>‡</i>)				
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificates o	f Status				
Special Instructions to Filing Officer:						





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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT: Ferguson Financial Group II LLC						
Name of Limited Liability Company						
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate 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:						
Rodney S. Fersuson Name of Person						
Name of Person						
Ferguson Financial Group LLC Firm/Company						
Firm/Company						
466 Blackwolf Run Dr.						
Address						
City/State and Zip Code						
City/State and Zip Code						
Rodeffgst1. com						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Kathy Ferguson at 314, 821-0500						
Name of Contact Person Area Code Daytime Telephone Number						
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton Building						
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301						
Enclosed is a check for the following amount:						
☐ \$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						

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:

	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
	ne unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limite ty Company," "L.L.C," or "LLC.")
	Missouri 3. 47-3368510
	sdiction under the law of which foreign limited liability (FEI number, if applicable) npany is organized)
_	(Date first transacted business in Florida 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)
_	4193 Roberts Point Circle
_	Sarasota Fl. 34242 (Street Address of Principal Office)
	Street Address of Principal Office) 766 Blackworf lun Dr.
	7.04
	1 + ESS 040 Locallin
	(Mailing Address)
T	he name, title or capacity and address of the person(s) who has/have authority to manage is/are:
	Rodney Stuart Ferguson - Financial Advise &
	466 Black wolf lun Dr.
	Orold on Locublin
	ached is an original certificate of existence, no more than 90 days old, duly authenticated by the offic g custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not
сер	table. If the certificate is in a foreign language, a translation of the certificate under oath of the translated be submitted)
	2011 m
	Signature of an authorized person
	rdance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein

Rodney S. Fersuson

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.	TI	he	name	of	the	Lim	ited	Lia	bil	ity	Company	is:
----	----	----	------	----	-----	-----	------	-----	-----	-----	---------	-----

Ferguson Financial Group II LLC

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

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

Rodney S. Fe	רועום	مس مسامری ح ق
	—— (f. 5	
4193 Roberts	AH-SS-HA	
Florida Street Addres	<u> </u>	
Sarasota	FL 34242	E FLORE SINI

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.

\$ 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 MISSOURI



Jason Kander Secretary of State

CERTIFICATE OF GOOD STANDING

I, JASON KANDER, Secretary of State of the STATE OF MISSOURI, do hereby certify that the records in my office and in my care and custody reveal that

Ferguson Financial Group II, LLC LC0864413

was created under the laws of this State on the 2nd day of January, 2008, and is active, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 22nd day of July, 2015.

Secretary of State

Certification Number: CERT

Certification Number: CERT-07222015-0017

