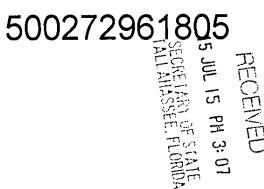
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FLORIDA DEPARTMENT OF STATE Division of Corporations

July 16, 2015

MARCIO RAMOS-PINTO 73 RED MILL DRIVE PALM COAST, FL 32164

SUBJECT: ELEGANT EVENTS STAFFING LLC

Ref. Number: W15000047845

We have received your document for ELEGANT EVENTS STAFFING LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

There is a fee of \$125.00 due.

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.

Stacey M Mason Regulatory Specialist II

Letter Number: 515A00014982

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:	ELEGANT EVENTS	S STAFFING LLC.					
20202011		Name of I	imited Liability C	Company			
The enclosed Existence, an	"Application by Fore	eign Limited Liability Comp I to register the above refere	any for Authoriza nced foreign limit	tion to Trar ed liability	nsact Business in Florida," company to transact busin	Certificate of ess in Florida	
Please return	all correspondence co	oncerning this matter to the	following:				
	MARCIO RAM	OS-PINTO					
		Na	ime of Person				
	ELEGANT EVI	EGANT EVENTS STAFFING LLC. Firm/Company					
Firm/Company							
	73 RED MILL I	OR.					
			Address		Daytime Telephone Number CET ADDRESS: on of Corporations tration Section in Building		
	PALM COAST, FLORIDA 32164						
		City/St	tate and Zip Code				
	marcio@elegants	taffingservices.com					
		E-mail address: (to be used	for future annual	report noti	fication)		
For further in	nformation concerning	g this matter, please call:					
MA	RCIO RAMOS-PIN	го	703 at (626-026	3		
	Name o	f Contact Person	Area Code	Dayt	ime Telephone Number		
Div Reg P.O	ision of Corporations pistration Section Box 6327 ahassee, FL 32314			Division of Registration Clifton Bu 2661 Exec	of Corporations on Section		
	a check for the follow \$125.00 Filing Fee	ing amount: \$\square\$\square\$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filir Certified Copy	ng Fee &	■ \$160.00 Filing Fee, Co of Status & Certified Cop		

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:

EVECANIE DI PER DE CONTROL DE LA CONTROL DE
ELEGANT EVENTS STAFFING LLC.
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "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.")
VIRGINIA 3 27-4931298
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
N/A
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 73 RED MILL DR., PALM COAST, FL 32164
73 RED WILL DR., FALM COAST, FL 32104
(Street Address of Principal Office)
5. 73 RED MILL DR., PALM COAST, FL 32164
%-¬¬,
(Mailing Address)
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Office Address: 73 RED MILL DR.
PALM COAST , Florida 32/68 5
(City) (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 designate
this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comp
with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accepted by the obligations of my position as registered agent.
at obaguatins 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:
MARCELO RAMOS, GENERAL MANAGER
5021 TICONDEROGA CT., BURKE, VA 22015
marcelo@elegantstaffingservices.com
Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the urisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under of the translator must be submitted)
Signature of an authorized person
This document is executed in accordance with section 605.02d3 (1) (b), Florida Statutes. I am aware that any false information ubmitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Typed or printed name of signee

MARCIO RAMOS-PINTO

Commontaealth of Hirginia



State Corporation Commission

CERTIFICATE OF FACT

I Certify the Following from the Records of the Commission:

That ELEGANT EVENTS STAFFING, LLC is duly organized as a limited liability company under the law of the Commonwealth of Virginia;

That the date of its organization is March 1, 2011; and

That the limited liability company is in existence in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date: July 8, 2015

Joel H. Peck, Clerk of the Commission

CISECOM

Desument Control Number: 450706

Document Control Number: 1507085571