## 11150000007058

(Requestor's Name)						
(Address)						
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(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
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2015 SEP -3 PM 2: 24
SECKETARY OF STATE
ASSCRIPTION TO THE PROPERTY OF THE PROPER

K.SALY EXAMINER SEP -4 2015



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15 SEP -3 PM 2: 18

SECKLIAKT OF STATE
TALLAHASSEE, FLORIDA

August 19, 2015

RICHARD BRUNO 2924 E MICHIGAN ST. ORLANDO, FL. 32806

SUBJECT: ASSOCIATION RESOURCES LLC

Ref. Number: W15000055387

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

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Karen A Saly Regulatory Specialist II

Letter Number: 815A00017466



Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 Attn: Karen A Saly

Regulatory Specialist II

Reference Number: W15000055387

September 1, 2015

Good Morning,

Please find enclosed the corrections requested per your letter dated August 19, 2015 in regards to our Application By Foreign Limited Liability Company For Authorization To Transact Business In Florida.

The application now reflects an Authorized Representative and also enclosed is a Certificate of Organization & a Certificate of Good Standing from the State of Wyoming.

We truly appreciate your help with this. Please don't hesitate to contact us if you have any questions or require any additional information.

Thank you,

Rita Stuart (407)401-9194

	sistration Section ision of Corporation	•	٠			
SUBJECT:	Association Resources LLC					
SOBJECT:		Name of Limited Liability Company				
The enclosed Existence, an	d "Application by Fore	eign Limited Liability Compa I to register the above referen	ny for Authorization iced foreign limited	i to Tran liability (	sact Business in Floride," Certificate of company to transact business in Florida	
Please return	all correspondence c	onceming this matter to the fo	ollowing:			
	Richard Bruno					
	Name of Person					
Firm/Company						
2924 E Michigan Street						
Address						
	Orlando, FL 32806					
City/State and Zip Code						
		rbnın	io@yahoo.com			
		E-mail address: (to be used	for future annual re-	port noti	fication)	
For further	information concernin	g this matter, please call:				
	Richard Bruno		813 777		7-1695	
	Name	of Contact Person	Area Code	Day	time Telephone Number	
Di Re	MAILING ADDRESS: Division of Corporations Registration Section			STREET ADDRESS: Division of Corporations Registration Section		
	O. Box 6327 Illahassec, FL 32314	2	Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			
	Enclosed is a check for the following amount:  \$\vec{\vec{\vec{\vec{\vec{\vec{\vec{		☐ \$155.00 Filing Fee & Certified Copy		☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy	

LABOR OF THE PROPERTY OF THE COVER LETTER

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS

IN COMPLIANCE WITH SECTION 605,0902, FLORIDA STATUTIES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREKY LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Association Resources 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.") Wyoming 61-1766101 (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) (Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 2924 E. Michigan Street Orlando, FL 32806 (Street Address of Principal Office) 2924 E. Michigan Street Orlando, FL 32806 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Richard Bruno Name: 2924 E. Michigan Street Office Address: Orlando , Florida 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. 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Rita Stuart Authorized Representative (AR) 12326 Kitty Brook Drive Houston, TX 77071 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 zertificate is in a foreign language, a translation of the certificate under outh of the translator must be submitted) 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.

Rita Stuart

Typed or printed name of signee

## STATE OF WYOMING Office of the Secretary of State

!, EDWARD F. MURRAY, III, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

## Association Resources LLC is a Limited Liability Company

formed or qualified under the laws of Wyoming did on July 14, 2015, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number 2015-000690784.

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 7th day of August, 2015 at 7:13 AM. This certificate is assigned 018303729.



Secretary of State

2015 SEP -3 PM 2: 25

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.