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]	Registration Section Division of Corporation	15				
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SUBJEC	Newsel Ventures Ll	LC				
SUBJEC	••	Name of	Limited Liability C	ompany		
					nsact Business in Florida," Certificate of company to transact business in Florida.	,
Please ret	urn all correspondence of	concerning this matter to the	following:			
	• Dianne Sima					
		N	ame of Person			
	Newsel Ventur	es LLC				
	<u> </u>	F	irm/Company			
	7512 Dr. Phillips Blvd. Suite 50-149					
	·		Address	•		
	Orlando, FL. 3	2819				
		City/S	state and Zip Code			
	hello@powerthe	clean.com				
		E-mail address: (to be use	d for future annual	report not	ification)	
^r or furthe	r information concerning	g this matter, please call:				
:	Shaun Sima		407 at (605-270	09	
-	Name o	f Contact Person	at (Area Code	Day	time Telephone Number	
<u>1</u>	AAILING ADDRESS:			STREET	ADDRESS:	
Ī	Division of Corporations			Division of	of Corporations	
	Registration Section 2.O. Box 6327			Registrati Clifton B	on Section	
	allahassee, FL 32314				cutive Center Circle	
	,				ee, FL 32301	
	s a check for the follow					
_	3 \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy	g Fee &	□ \$160.00 Filing Fee, Certificate of Status & Certified Copy	

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FLORIDA DEPARTMENT OF STATE Division of Corporations SECRETARY OF STATE FALLAHASSEE, FLORIDA

August 25, 2015

DIANNE SIMA 7512 DR PHILLIPS BLVD SUITE 50-149 ORLANDO, FL 32819

SUBJECT: NEWSEL VENTURES LLC Ref. Number: W15000056526

We have received your document for NEWSEL VENTURES LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

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).

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.

Yasemin Y Sulker Regulatory Specialist II

Letter Number: 815A00017932

9/1/15. Requested Abaiments actached.

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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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;

I. Newsel Ventures LLC

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

(If name unavailable, enter al Liability Company," "L.L.C,	Iternate name adopted for the purpose of tra " or "LLC.")	ansacting business	in Florida. The alternate name	must includ	2 "Limi	ted
, Delaware	2	47-4693657				
<u> </u>	of which foreign limited liability	·	(FEI number, if applicable)	<u></u>		
4						
	(Date first transacted business in F (See sections 605.0904 & 605.0905.	Florida, if prior to , F.S. to determine	registration.) penalty liability)			
5. 7512 Dr. Phillps Blvd.	Suite 50-149					
Orlando, FL. 32819						
	(Street Address of Princip	pal Office)				
6. 7512 Dr. Phillips Blvd.	Suite 50-149					
Orlando, FL. 32819						•
	(Mailing Addres	ss)		reg Mari		
7. Name and street addres	ss of Florida registered agent: (P.O. Bo	ox <u>NOT</u> accepta	ble)	Ē	ភ	
Name:	Dianne Sima				SEP	
Office Address:	7512 Dr. Phillips Blvd. Suite 50-149)	-	S S S	<u> </u>	te t
	Orlando		, Florida ³²⁸¹⁹	त्तं द्र् जा	ΡH	
	(City)		(Zip code)		÷	1
this application, I hereby	gistered agent and to accept service og accept the appointment as registered o statutes relative to the proper and con tion as registered agent.	agent and agree	to act in this capacity. I fu	rther agree	to cor	nply
	(Registered a	igent's signature)				
8 The name title or cana	acity and address of the person(s) who l	has/have authori	ty to manage is/are:			
	llips Blvd. Suite 50-149 Orlando, FL. 3					
			JK)			
	, <u>, , , , , , , , , , , , , , , , , , </u>					
- -						
	of existence, no more than 90 days old of which it is organized. (If the certific abmitted)					
	Signature of an	authorized person	-			
This document is executed	in accordance with section 605 0203 ((1) (b) Florida S	tatutes. I am aware that any	false inform	ation	

submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Dianne	Sima
Diame	Sinna

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NEWSEL VENTURES, 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 FIRST DAY OF SEPTEMBER, A.D. 2015.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NEWSEL VENTURES, LLC" WAS FORMED ON THE THIRTIETH DAY OF JULY, A.D. 2015.



AUTHENTICATION: 2692228

DATE: 09-01-15

5794981 8300

151241071 You may verify this certificate online at corp.delaware.gov/authver.shtml Division of Corporations - Online Services



The Secretary of State of Delaware issued a certificate for NEWSEL VENTURES, LLC whose file number is 5794981 on 09/01/2015 under request number 151241071 for authentication number 2692228.



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