## M15000007457

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2015 SEP 17 PH 1: 09
SEGRETARY OF SEALER
ANASSEE PLOCUM

SEP 18 1915 J. HARRIS Dear Sir/Madam,

We are submitting a request to Register Peoplecourses, LLC (A Massachusetts LLC) to be registered in the business of Florida. Please note that the company is planning to operate in the State of Florida in about a month or so and no longer is operating in the State of Massachusetts and that is why we showed our Florida address as our permanent/corporate address as this will be what we will use going forward.

We are attaching the Certificate of Good Standing under seal from the State of Massachusetts. Feel free to contact my CPA (Yasar J. Bokhari) who is listed on the application as point of contact if you have any additional questions.

Regards

Mark Fourman

### **COVER LETTER**

	ation Section 1 of Corporation	ıs								
PE SUBJECT:	OPLECOURSES	, LLC								
Name of Limited Liability Company										
		eign Limited Liability Comp d to register the above refere								
Please return all	correspondence c	oncerning this matter to the	following:							
	YASAR J. BOI	CHARI								
	• •	Na	me of Person							
	BOKHARI CONSULTING CPA P.C.									
Firm/Company										
	1019 JERICHO TURNPIKE									
			Address							
	NEW HYDE P.	ARK, NY 11040								
		City/St	ate and Zip Code							
	yasar@bokharicp	ea.com								
_		E-mail address: (to be used	for future annual	report not	ification)					
For further inform	nation concerning	g this matter, please call:								
YASAF	R J. BOKHARI		516 at (	492-339	95					
	Name o	f Contact Person	Area Code	Day	time Telephone Number					
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division of Registrati Clifton Bu 2661 Exec	ADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301						
Enclosed is a che ☐ \$125.	ck for the follow 00 Filing Fee	ing amount:  \$\Boxed{\Boxesia}\$130.00 Filing Fee & Certificate of Status	■ \$155.00 Filin Certified Copy	ng Fee &	☐ \$160.00 Filing Fee, Coof 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:

name unavailable, enter a ability Company," "L.L.C,	Iternate name adopted for the purpose	e of transacting business	s in Florida. The alternate nam	ne must include "L	imited
MASSACHUSETTS	(iii dde.)	2 001038916			
Jurisdiction under the law company is organized)	of which foreign limited liability	3.	(FEI number, if applicable)	)	_
N/A					
382 NE 191ST SUITE	(Date first transacted busine (See sections 605.0904 & 605. £ #18786	ess in Florida, if prior to .0905, F.S. to determine	registration.) penalty liability)	_	
MIAMI, FL 33179-38	99				
	(Street Address of I	Principal Office)		-	
382 NE 191ST SUITE	#18786			- AC - 2015	
MIAMI, FL 33179-389	99			S S	man stort and
	(Mailing A	Address)	·····	- 至年 中	
Name and street address	ss of Florida registered agent: (P.	O Box NOT accenta	ihle)	SS	eparan.
	MARK FOURMAN	0. 150% 1101 accept			i i
Name:					5000
Office Address:	382 NE 191ST SUITE #18786		-		
	MIAMI		, Florida 33179-3899	Sm 6	
			(53)	-	
gistered agent's accep		sice of process for the	(Zip code)	lity company at i	ba pla
rving been named as re signated in this applica complywith the provisi cept the obligations of i	tance: gistered agent and to accept serv tion, I hereby accept the appoint ons of all statutes relative to the my position as registered agent (Regista	ment as registered ag proper and complete ered agent's signature)	above stated limited liabi ent and agree to act in thi performance of my duties	s capacity. I fur	ther ag
rving been named as re signated in this applica complywith the provisi cept the obligations of i	tance: gistered agent and to accept serv tion, I hereby accept the appoint ons of all statutes relative to the my position as registered agent	ment as registered ag proper and complete ered agent's signature)	above stated limited liabi ent and agree to act in thi performance of my duties	s capacity. I fur	ther ag
wing been named as resignated in this applica complywith the provision cept the obligations of the The name, title or capa	tance: gistered agent and to accept servition, I hereby accept the appoint ons of all statutes relative to the my position as registered agent  (Registered and address of the person(s)	ment as registered ag proper and complete ered agent's signature)	above stated limited liabi ent and agree to act in thi performance of my duties	s capacity. I fur	ther ag
rying been named as resignated in this applica complywith the provision cept the obligations of the name, title or capa ARK FOURMAN	tance: gistered agent and to accept servition, I hereby accept the appoint ons of all statutes relative to the my position as registered agent  (Registered and address of the person(s)	ment as registered ag proper and complete ered agent's signature)	above stated limited liabi ent and agree to act in thi performance of my duties	s capacity. I fur	ther ag

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.



# The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02188

### August 26, 2015

#### TO WHOM IT MAY CONCERN:

I hereby certify that a certificate of organization of a Limited Liability Company was filed in this office by

### PEOPLECOURSES, LLC

in accordance with the provisions of Massachusetts General Laws Chapter 156C on October 27, 2010.

I further certify that said Limited Liability Company has filed all annual reports due and paid all fees with respect to such reports; that said Limited Liability Company has not filed a certificate of cancellation or withdrawal; and that said Limited Liability Company is in good standing with this office.

I also certify that the names of all managers listed in the most recent filing are: MARK FOURMAN

I further certify, the names of all persons authorized to execute documents filed with this office and listed in the most recent filing are: MARK FOURMAN

The names of all persons authorized to act with respect to real property listed in the most recent filing are: MARK FOURMAN, RACHEL GAKENHEIMER



In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth

William Travin Galicin