<u>14500007714</u>

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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SEP 2 8 2015 **Y SULKER**

CAPITAL CONNECTION, INC.
417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Superior Resources, LLC			
···			
			Art of Inc. File
			LTD Partnership File
			Foreign Corp. File
			L.C. File
			Fictitious Name File
		_	Trade/Service Mark
			Merger File
		_	Art. of Amend. File
			RA Resignation
			Dissolution / Withdrawal
			Annual Report / Reinstatement
			Cert. Copy
			Photo Copy
			Certificate of Good Standing
		_	Certificate of Status
		_	Certificate of Fictitious Name
			Corp Record Search
		_	Officer Search
		_	Fictitious Search
Signature			Fictitious Owner Search
ŭ			Vehicle Search
			Driving Record
Requested by: Seth	09/25/15		UCC 1 or 3 File
Name		ime	UCC 11 Search
Name	Date I		UCC 11 Retrieval
Walk-In	Will Pick Up _		Courier

COVER LETTER

ro:	Registration Section Division of Corporation	28				
SUBJE	ст:Ѕир	erior Resour	Ces, LL Limited Liability (<u>C</u>		
					nsact Business in Florida," Certificate company to transact business in Florid	
Please r	eturn all correspondence	concerning this matter to the	following:			
		Joseph F. L	ame of Person	,		
		Daytona H	elwets im/Company	<u>-</u>		
		1541 State	Aue. Address			
		Holly Hill	FL 3	2117		
	Joe	α 1 \pm $$	1			
For furt	her information concemin	g this matter, please call:				
	Joseph F.	Cinge of Contact Person	at (386 Area Code) <u>67</u> -	7-7700 time Telephone Number	
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division Registrati Clifton B 2661 Exe	ADDRESS: of Corporations ion Section uilding cutive Center Circle ee, FL 32301	
Enclose	d is a check for the follow \$125.00 Filing Fee	ing amount: □ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filin Certified Copy	g Fee &	☐ \$160.00 Filing Fee, Certificate 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:
1
(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.")
2. Volume 1. A volume of which foreign limited liability company is organized) 3. 46-4265635 (FEI number, if applicable)
(Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability)
5 4730 S. Fort Apache Rd. Suite-300
(Street Address of Principal Office)
6. <u>1541 State Ave.</u>
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: 12ag Carles
Office Address: 1501 State The. Holly Hill, FL, Florida 32117
(City) (Zip code)
Registered agent's acceptance: 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 application, I hereby accept the appointment as registered agent and agree to act in this capacity. I funther agree
to complywith 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.
a tatel
((Registered agent's Signature)
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
Uttam Chindak - Newser 5
1591 Stole Aug.
1tolly 1711, FC 32117
2. 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 oath of the translator must be submitted)
Signature of an authorized person
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.
Typed or printed name of signee



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, BARBARA K. CEGAVSKE, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, SUPERIOR RESOURCES, LLC, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since December 6, 2013, and is in good standing in this state.

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IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on September 25, 2015.

Borbara K. Cegavske BARBARA K. CEGAVSKE

Secretary of State

Electronic Certificate
Certificate Number: C20150925-0123
You may verify this electronic certificate
online at http://www.nvsos.gov/