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| (Requestor's Name) | | | | | |
|--|--|--|--|--|--|
| (Address) | | | | | |
| (Address) | | | | | |
| (City/State/Zip/Phone #) | | | | | |
| PICK-UP WAIT MAIL | | | | | |
| (Business Entity Name) | | | | | |
| (Document Number) | | | | | |
| Certified Copies Certificates of Status | | | | | |
| Special Instructions to Filing Officer: Wrong form - more & H1553716 Cert. | | | | | |

Office Use Only



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10/08/15--01016--004 **72.50

08/07/15--01019--025 **87.50

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SECRETARY OF STATE

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3 MASON



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 18, 2015

JOE MAZON ***2ND LETTER***
101 NE 3RD AVENUE, SUITE 1500
FT. LAUDERDALE, FL 33301

SUBJECT: INEX DIRECT, LLC Ref. Number: W15000053716

We have received your document for INEX DIRECT, LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION - INC., but your entity is a LIMITED LIABILITY COMPANY - LLC. Please complete and return the enclosed blank form(s).

There is a balance due of \$72.50.

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

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: 215A00016816



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 10, 2015

JOE MAZON 101 NE 3RD STREET, SUITE 1500 FT. LAUDERDALE, FL 33301

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Stacey M Mason Regulatory Specialist II

Letter Number: 215A00016816

COVER LETTER

TO:

Registration Section

| T: | Name of I | imited Liability Co | ompany | | |
|---|---|---|----------------------------|---|--|
| closed "Application by Force, and check are submitted | eign Limited Liability Comp d to register the above refere | any for Authorizati need foreign limite | ion to Tra ed liability | nsact Business in Florida, company to transact business | |
| return all correspondence of | concerning this matter to the | following: | | | |
| Joseph Mazon | | | | | |
| ************************************** | Ne | ume of Person | | | |
| INEX DIRECT | LLC | | | | |
| \ \ \ \ _\(\begin{align*} \tag{1.00} | Fi | rm/Company | | | |
| 101 NE Third | Avenue, Suite 1500 | | | | |
| | | Address | | | |
| Fi Lauderdale, | FI, 33301 | | | | |
| | City/S | tate and Zip Code | | | |
| j.mazon19@yah | oo.com | | | | |
| | E-mail address: (to be used | for future annual | report not | ification) | |
| irther information concerning | g this matter, please call: | | | | |
| Joseph Mazon | | 305 at (| 282-72 | 282-7283 | |
| Name o | of Contact Person | Area Code | Day | rtime Telephone Number | |
| MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 | | STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 | | | |
| osed is a check for the follow \$125.00 Filing Fee | ving amount: \$\square\ | ☐ \$155.00 Filin Certified Copy | g Гсе & | S160.00 Filing Fee. of Status & Certified C | |
| | | | | | |

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

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUITS, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY

COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: INEX DIRECT, 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,") 2 DELAWARE (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) No Business yet transacted (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 101 NE Third Avenue, Suite 1500 (Street Address of Principal Office) Ft Lauderdale, Fl 33301 Same as above (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Joseph Mazon Name: 101 NE Third Avenue, Suite 1500 Office Address: Ft Lauderdale, Fl (City) (Zin 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 design this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agrees to comwith the provisions of all statutes relative to the proper and complete performance of my duties, and I am partigar with and accept the obligations of my position as registered agen (Registered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Tom Scholmeyer Ezell Brown Ezell Brown, LLC 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 certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) pature 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. Joseph Mazon Typed or printed name of signee

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "INEX DIRECT, 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 FIFTH DAY OF OCTOBER, A.D. 2015.

a at coro delaware gov/aut

Authentication: 10185690

Date: 10-05-15