M15000008575

(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:						

Office Use Only



200278407902

10/26/15--01040--002 **125.00



COVER LETTER

•	Scriptsource LLC					
SUBJECT:						
	Name of Limited Liability Company					
The enclosed Existence, and	"Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of check are submitted to register the above referenced foreign limited liability company to transact business in Florid					
Please return a	all correspondence concerning this matter to the following:					
	Joseph Gulla					
	Name of Person					
	Scriptsource LLC					
	Firm/Company					
	91 Drinkwater Rd					
	Address					
	Hampton Falls, NH 03844					
	City/State and Zip Code					
	JGulla@scriptsourcellc.com					
	E-mail address: (to be used for future annual report notification)					
For further inf	ormation concerning this matter, please call:					
Josep	oh Gulla 603 770-0833					
	Name of Contact Person Area Code Daytime Telephone Number					
Divis Regis P.O.	LING ADDRESS: sion of Corporations Division of Corporations Stration Section Registration Section Clifton Building hassee, FL 32314 Clifton Building Tallahassee, FL 32301					
	check for the following amount: 25.00 Filing Fee					

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

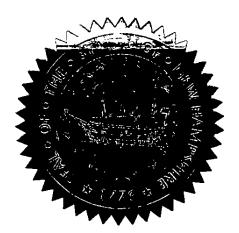
1. Scriptsource LLC (Name of For	COMPANY HAW I'S reign Limited Liability Company; must	include "Limited Lia	bility Company," "L.L.C.," or "L	LC.")
(If name unavailable, enter a Liability Company," "L.L.C,	Ilternate name adopted for the purpose," or "LLC.")	of transacting busines	s in Florida. The alternate name	must include "Limited
2. New Hampshire		3. 46-3267693		
company is organized)	of which foreign limited liability		(FEI number, if applicable)	-
4. 09/01/2015	(Data first transacted builting			
5. 91 Drinkwater Rd	(Date first transacted business (See sections 605.0904 & 605.0	905, F.S. to determine	e penalty liability)	
Hampston Falls, NH 0				MIS OCT 26 SECHETARY
6. 91 Drinkwater Rd	(Street Address of Pr	rincipal Office)		ET Z
Hampton Falls, NH 03				
	(Mailing Ac	ddress)		2 9
Name and street address	ss of Florida registered agent: (P.C). Box <u>NOT</u> accept	able)	22
Name:	Jesus Anthony Fernandez		_	\$. P
Office Address:	580 Brantley Terrace Way Unit 3	301	_	
	Altamonte Springs (City)		, Florida	
designated in this applica to complywith the provisi	otance: egistered agent and to accept service ation, I hereby accept the appointn ions of all statutes relative to the put my position as registered agent.	ce of process for th nent as registered a	e above stated limited liabilit gent and agree to act in this	capacity. I further agree
8. The name, title or capa	acity and address of the person(s) v	who has/have author	rity to manage is/are:	
Joseph Gulla, Member M	anager, 91 Drinkwater Rd, Hampst	ton Falls, NH 0384	4	
urisdiction under the law of the translator must be s	yeels of I	rtificate is in a foreig	gn language, a translation of the	he certificate under oath
submitted in a document to	o the Department of State constitute	es a third degree feld	ony as provided for in s.817.1.	55, F.S.
	Joseph Gulla			

Typed or printed name of signee

State of New Hampshire Department of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that ScriptSource, LLC is a New Hampshire limited liability company formed on July 26, 2013. I further certify that it is in good standing as far as this office is concerned, having filed the annual report(s) and paid the fees required by law; and that a certificate of cancellation has not been filed.



In TESTIMONY WHEREOF, I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 20th day of October, A.D. 2015

William M. Gardner Secretary of State