M1400000403

(Red	uestor's Name)	·
(Add	Iress)	
(Add	iress)	
(City	/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nar	me)
(Doc	cument Number)	<u></u>
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	
		-

Office Use Only



700280111807

12/17/15--01010--008 **260.00



JAN 15 2016 J SHIVERS

114



December 17, 2015

KRISTINA STEIN 4730 S FORT APACHE RD STE 300 LAS VEGAS, NV 89147

SUBJECT: LOKI MARKETING GROUP, LLC

Ref. Number: W15000081073

We have received your document for LOKI MARKETING GROUP, LLC and your check(s) totaling \$260.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

Please return the corrected original and one copy of 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.

Justin M Shivers
Regulatory Specialist III
Registration/Qualification Section

Letter Number: 715A00026430

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: LOK' Marketing Group, LLC Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida
Please return all correspondence concerning this matter to the following:
Mristing Stein Name of Person
LOK: Marketing Group, LLC
4/730 S. Fort Apache Rd Ste300
Las Vegas MV 89147 City/State and Zip Code
Kristing Centishtend properties, Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Kristing Stein at (727) Lo86-2693 Name of Contact Person Area Code Daytime 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
Enclosed is a check for the following amount: \$\Begin{align*} \Pi \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \

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. Loki Marke fins Group, 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. Vevada 3. (Jurisdiction under the law of which foreign limited liability company is organized) (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 STE300 Las Vegas, UV 89 147 (Street Address of Principal Office)
6
Same as above (Mailing Address)
7. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)
Name: Kristing Stein Loki Marketing Group, LLC Office Address: 7780 494 ST N. #189
Office Address: 7/80 2/944 ST N. #/89
Priellas Park , Florida 33781
Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with 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. (Registered agent's signature)
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
Kristina Stein, 6410 79th Ave North
Pinellas Park, FL3378
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 oatly 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 ciones

SECRETARY OF STATE



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, LOKI MARKETING GROUP, 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 August 28, 2015, and is in good standing in this state.

AL OF THE OF

BARBARA K. CEGAVSKE Secretary of State

office on September 15, 2015.

IN WITNESS WHEREOF, I have hereunte ser my hand and affixed the Great Seal of State, at my

Electronic Certificate
Certificate Number: C20150915-1742
You may verify this electronic certificate
online at http://www.nvsos.gov/