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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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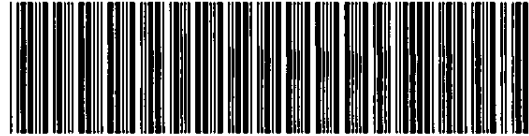
W15-83212
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

JAN 21 2016

N. CAUSSEAU

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: IS Security Solutions and Consulting 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:

Wendi Finn

Name of Person

IS Security Solutions and Consulting LLC

Firm/Company

7449 NW 117th Lane

Address

Parkland, FL 33076

City/State and Zip Code

finn@issecuritysolutions.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Wendi Finn

Name of Contact Person

at (614)

Area Code

638 8959

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:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☐ \$160.00 Filing Fee, Certificate
of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 31, 2015

WENDI FINN
IS SECURITY SOLUTIONS AND CONSULTING LLC
7449 NW 117TH LANE
PARKLAND, FL 33076

SUBJECT: IS SECURITY SOLUTIONS AND CONSULTING, LLC
Ref. Number: W15000083212

We have received your document for IS SECURITY SOLUTIONS AND CONSULTING, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

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.

Nanette Causseaux
Regulatory Specialist II Supervisor

Letter Number: 215A00027277

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. IS Security Solutions and Consulting 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. Ohio 3. 27-0105463
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. upon qualification
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. Wendi Finn
7449 NW 117th Lane
(Street Address of Principal Office)

6. Parkland FL 33076
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Wendi Finn
Office Address: 7449 NW 117th Lane
Parkland, Florida 33076
(City) (Zip code)

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TALLAHASSEE, FLORIDA

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 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.

Wendi Finn
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Wendi Finn - AMBR
Shannon Finn - AR

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)

Wendi Finn
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.

Wendi Finn
Typed or printed name of signee

UNITED STATES OF AMERICA
STATE OF OHIO
OFFICE OF THE SECRETARY OF STATE

I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show IS SECURITY SOLUTIONS AND CONSULTING, LLC, an Ohio Limited Liability Company, Registration Number 1483424, was organized within the State of Ohio on August 16, 2004, is currently in FULL FORCE AND EFFECT upon the records of this office.

FILED
16 JAN 21 AM 10:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 20th day of December, A.D. 2015.

Jon Husted

Ohio Secretary of State

Validation Number: 201535400058