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FLORIDA DEPARTMENT OF STATE Division of Corporations

January 6, 2016

MICHAEL HARTINGS 131 PALMETTO LN LARGO, FL 33770

SUBJECT: LIFESPAN VENTURE GROUP, LLC

Ref. Number: W16000000580

We have received your document for LIFESPAN VENTURE GROUP, 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):

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.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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: 316A00000268

COVER LETTER

Registration Section

î'O:

Division of Corporations
SUBJECT: LIFE SPAN VENTURE 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.
Flease return all correspondence concerning this matter to the following:
MICHAEL T- HARTINGS Name of Person
Firm/Company
131 PALMETTO L
LARGO, FL 33770 City/State and Zip Code
E-mail address: (so be used for future annual report notification)
For further information concerning this matter, please call:
MICHARL T. HARTINGS at (727) Zo3 - Z475 Name of Contact Person Area Code Daytime Telephone Number
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301
Et closed is a check for the following amount: \$\sum_{125.00}\$ \text{Filing Fee} \text{ \$\sum_{130.00}\$ Filing Fee & Certificate of Status } \text{ \$\sum_{155.00}\$ Filing Fee & Certificate of Status & Certified Copy } \text{ \$\sum_{155.00}\$ Filing Fee & Certified Copy } \$\sum_{155.0

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 COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA: FESPAN VENTURE GROUP LLC

sine 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.") (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration.)
(See sections 605,0904 & 605,0905, F.S. to determine penalty liability) PAL 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) FILINGS INCORPORATED Office Address: 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 his application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply vith the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept he 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: HARTINGS 131 PALMETTO LN, LARGO FL 33770 MGR MICHAEL 1. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the j irisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath cf 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 s ibmitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. MICHAEL T HARTINGS
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, LIFESPAN VENTURE 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 November 16, 2015, and is in good standing in this state.

SEAL OF THE OF

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on December 3, 2015.

BARBARA K. CEGAVSKE Secretary of State

Electronic Certificate
Certificate Number: C20151203-2153
You may verify this electronic certificate
online at http://www.nvsos.gov/