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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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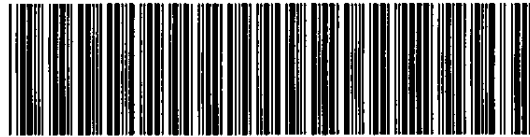
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2016 FEB - 1 P 4: 13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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FEB 02 2016  
D. BRUCE

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Grand Prix Tutoring, 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:

Danielle Cooper  
Name of Person

Grand Prix Tutoring, LLC  
Firm/Company

90 Tall Oak Crescent  
Address

Syosset, NY 11791  
City/State and Zip Code

info@grandprixtutoring.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Danielle Cooper at (516) 971-9281  
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:

- ☐ \$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

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2016 FEB - 1 P 4: 13  
TALLAHASSEE  
CLERK OF SUPERIOR COURT

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. Grand Prix Tutoring, 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. New York 3. \_\_\_\_\_  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. February 1st, 2016  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 90 Tall Oak Crescent  
Syosset, NY 11791  
(Street Address of Principal Office)

6. 90 Tall Oak Crescent  
Syosset, NY 11791  
(Mailing Address)

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

Name: REGISTERED AGENTS INC.

Office Address: 3030 N. Rocky Point Drive, STE 150A

TAMPA

(City)

, Florida 33607

(Zip 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 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.

Bill Havre

Bill Havre/Assistant Secretary/Registered Agents Inc

(Registered agent's signature)

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

Danielle Cooper, Managing Member, 90 Tall Oak  
Crescent, Syosset, NY 11791

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)

Danielle Cooper

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.

Danielle Cooper

Typed or printed name of signee

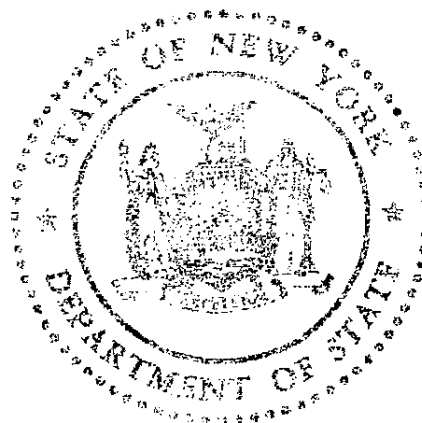
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TALLAHASSEE, FLORIDA

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**State of New York  
Department of State } ss:**

I hereby certify, that GRAND PRIX TUTORING, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 11/19/2015, and that the Limited Liability Company is existing so far as shown by the records of the Department..



\*\*\*

*WITNESS my hand and the official seal  
of the Department of State at the City of  
Albany, this 14th day of January two  
thousand and sixteen.*

*Anthony Scardino*

Executive Deputy Secretary of State