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(Re	equestor's Name)	-
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
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2016 FEB -5 PH 3: 56

HARRIS

COVER LETTER

TO:	Registration Section Division of Corporation	s			•
SUBJI	STAGNITO CAPITA	AL LLC			
0000		Name of	Limited Liability	Company	· · · · · · · · · · · · · · · · · · ·
					ansact Business in Florida," Certificate of y company to transact business in Florida.
Please	return all correspondence co	oncerning this matter to the	following:		
	ISSA ASSAD				
		N	ame of Person		
	 				
		F	irm/Company		
	12767 EQUEST	RIAN TRAIL			
			Address		
	DAVIE FL 333	30			
		City/S	tate and Zip Code		
	ISSA@QUADRA	ANTHOLDINGS.COM			
		E-mail address: (to be use	d for future annual	report no	tification)
For fur	ther information concerning	this matter, please call:			
	ISSA ASAD		305 at (915960	00
	Name of	f Contact Person	Area Code	Day	ytime Telephone Number
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division Registrat Clifton E 2661 Exc	of Corporations ion Section Building ecutive Center Circle see, FL 32301
Enctos	ed is a check for the following \$125.00 Filing Fee	ing amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155,00 Fili Certified Copy	ng Fee &	□ \$160.00 Filing Fee, Certificate of Status & Certified Copy



February 3, 2016

ISSA ASSAD 12767 EQUESTRIAN TRAIL DAVIE, FL 33330

SUBJECT: STAGNITO CAPITAL LLC

Ref. Number: W16000007962

2016 FEB -5 PM 1:27
SECRELARY OF STATE
SECRELARY OF STATE

We have received your document for STAGNITO CAPITAL LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

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 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.

Jenna D Harris Regulatory Specialist II

Letter Number: 116A00002378

5 PH 3:55

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:

	oign connect Educativy Company, main morae	e "Limited Liability Company," "L.L.C.," or	"LLC.")
Liability Company," "L.L.C.	Iternate name adopted for the purpose of tran," or "LLC.")	sacting business in Florida. The alternate nar	ne must include "Limited
DELEWARE	3.	APPLIED FOR	
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)
J			_
	(Date first transacted business in Flo (See sections 605,0904 & 605,0905, F	orida, if prior to registration.) .S. to determine penalty liability)	
i			-
12767 EQUESTRIAN	TRAIL DAVIE FL 33330		K2
	(Street Address of Principa	Office)	
)			
	TRAIL DAVIE FL 33330		CONT. OT &
	(Mailing Address)	
. Name and street addre	ss of Florida registered agent: (P.O. Box	NOT_acceptable)	းမြို့ မြို့
Name:	JEFF TINDEL		10810V 3: 22 1 3: 22
Office Address:	12767 EQUESTRIAN TRAIL	***************************************	
	DAVIE	, Florida <u>33330</u>	
Registered agent's accep	(City)	(Zip code)	_
esignated in this applica o complywith the provisi	egistered agent and to accept service of partion, I hereby accept the appointment a ions of all statutes relative to the proper my position as registered agent	s registered agent and agree to act in th and complete <u>performance</u> of my duties	is capacity. I further ag
lesignated in this applica o complywith the provisi accept the obligations of a	ition, I hereby accept the appointment a ions of all statutes relative to the proper	s registered agent and agree to act in th and complete performance of my duties fit's signature)	is capacity. I further ag
lesignated in this applica o complywith the provisi accept the obligations of accept the obligations of 8. The name, title or cap	ition, I hereby accept the appointment a ions of all statutes relative to the proper my position as registered agent Registered age	s registered agent and agree to act in th and complete performance of my duties fit's signature)	is capacity. I further ag
designated in this applicate of complywith the provision of the obligations of the obligations of the complete of the name, title or capa assaurance. Attached is a certificate	acity and address of the person(s) who have of existence, no more than 90 days old, of which it is organized. (If the certificat	s registered agent and agree to act in the and complete performance of my duties of signature) as/have authority to manage is/arc:	is capacity. I further ag
esignated in this applicate complywith the provision complywith the provision coupt the obligations of the coupt the name, title or capa SSA ASSAD MGRM Attached is a certificate trisdiction under the law	acity and address of the person(s) who have of existence, no more than 90 days old, of which it is organized. (If the certificat	s registered agent and agree to act in the and complete performance of my duties of signature) as/have authority to manage is/are: duly authenticated by the official having e is in a foreign language, a translation of	is capacity. I further ag

Typed or printed name of signee

ISSA ASSAD

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "STAGNITO CAPITAL LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS

OF THE FIFTH DAY OF FEBRUARY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "STAGNITO CAPITAL LLC" WAS FORMED ON THE SIXTH DAY OF JANUARY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

5929456 8300

SR# 20160620838

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 201786231

Date: 02-05-16