

M1600000/121

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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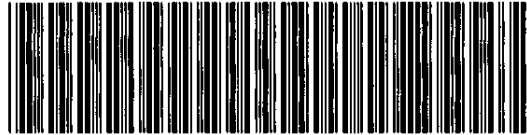
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALLY
EXAMINER
FEB 10

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: E-MAX INTERNATIONAL 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:

GUILLERMO MARTINEZ, CPA

Name of Person

FREUND KATZ GOLDSTON YOUNG, P.A.

Firm/Company

10729 SW 104TH STREET

Address

MIAMI, FLORIDA 33176

City/State and Zip Code

GMARTINEZ@TAX-DOCTOR.NET

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

For further information concerning this matter, please call:

GUILLERMO MARTINEZ

305

279-1288

at (_____) _____

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

850 - 245 - 6051

**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. E-MAX INTERNATIONAL, L.L.C.
(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. DELAWARE 3. 46-2164144
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

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

5. 101425 OVERSEAS HIGHWAY SUITE 313
KEY LARGO, FLORIDA 33037
(Street Address of Principal Office)

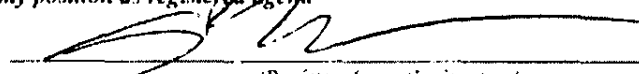
6. 101425 OVERSEAS HIGHWAY SUITE 313
KEY LARGO, FLORIDA 33037
(Mailing Address)

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

Name: GUILLERMO MARTINEZ
Office Address: 10729 SW 104TH STREET
MIAMI, FLORIDA , Florida 33176
(City) (Zip code)

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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

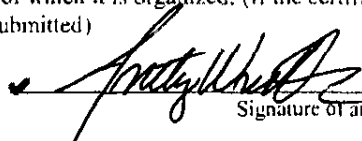

(Registered agent's signature)

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

ANTHONY WRIGHT = MANAGER- 101425 OVERSEAS HIGHWAY SUITE 313 KEY LARGO, FLORIDA 33037

ISIS WRIGHT - MANAGER - 101425 OVERSEAS HIGHWAY SUITE 313 KEY LARGO, FLORIDA 33037

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)


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.

ANTHONY WRIGHT
Typed or printed name of signee

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STATE DEPT OF STATE
TALLAHASSEE, FLORIDA

Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "E-MAX INTERNATIONAL 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 TWENTIETH DAY OF JANUARY, A.D. 2016.

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2016 FEB -8 PM 2:41
CLERK OF STATE
TALLAHASSEE, FLORIDA




Jeffrey W. Bullock, Secretary of State

5294639 8300

SR# 20160175823

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

Authentication: 201699561

Date: 01-20-16