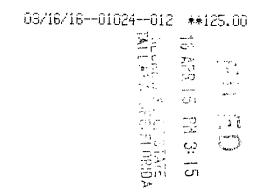
M1400000 3136

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		·
		:
		;





600283269936



J. HARRIS

COVER LETTER

TO:

TO: Registrat Division	tion Section of Corporation	ns			•		
SUBJECT:	Sva	SNATURE"			LLC		
		N	ame of Lu	mited Liability	y Company		
						unsact Business in Florida," C y company to transact busines	
Please return all co	orrespondence o	concerning this matte	r to the fo	llowing:			
_		IRA BO	RDE)			
			Nan	e of Person			
_		SIGUATU	ORE 1	RADEL	LLC		
			Firm	n/Company			
_		3404	ST.	IVES	BLUI).	
				Address			
_	5	PRING H	ich,	FL	346	09	
			City/Stat	e and Zip Cod	le		
	11	2A @ S16					
		E-mail address: (to	be used f	or future annu	al report not	ification)	
For further informa	ation concernin	g this matter, please	call:				
工	Ry Bo		·	at (600	10	2-8336	
	Name (of Contact Person		Area Cod	ie Day	time Telephone Number	
Division of	G ADDRESS: of Corporations	i			Division	ADDRESS: of Corporations	
Registrati P.O. Box	on Section				Registrati Clifton B	ion Section	
	ee, FL 32314				2661 Exe	ecutive Center Circle ee, FL 32301	
Enclosed is a checl	k for the follow	ing amount:					
斌\$ 125.0	0 Filing Fee	□ \$130.00 Filing F Certificate of Statu		S155.00 Fill Certified Cop	_	□ \$160.00 Filing Fee, Cert of Status & Certified Copy	

Signature Travel 6360 Nature Preserve Ln. Spring Hill, FL 34606 609-702-8336

To Whom It May Concern,

Enclosed please find the application for the registration of Signature Travel LLC as a foreign company operating in Florida. Along with this application is a copy of the certificate of formation from the state of Delaware and a check for \$125.00 to cover cost of registration.

Thank you for your help in this matter,

ra Borden

Signature Travel LLC



March 21, 2016

IRA BORDEN 3404 ST IVES BLVD SPRING HILL, FL 34609

SUBJECT: SIGNATURE TRAVEL LLC

Ref. Number: W16000020943

We have received your document for SIGNATURE TRAVEL 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: 216A00005717

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. SIGNATURE TRAUEL LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(Name of Poreign 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 "L.L.C,")
2. DELAWARK 3. 81-1733638 (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)
company is organized)
4. NO TRANSACTIONS HAVE TAKEN PLACE
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. SIGNATURE TRAVELLE
(Street Address of Principal Office)
6. SIGNATURE TRAVEL LIC
6360 NATURE PRESERVE W, SPRING HILL, FL 34606
(Mailing Address)
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: IFA BORDEN
Marile.
Office Address: 6360 NATURE PRESERVIL CA
Office Address: 6360 NATURE PLESERVE LA SPLAGE OF CITY (City) Florida 34606 (Zip code)
(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 complywith the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with an 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:
TLA BOLDEN MGL
6360 HATURE PLESERUE LUI
S/KING HILL, FL 34606
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.
TLA BORDEN

Typed or printed name of signee

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "SIGNATURE TRAVEL 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 SIXTH DAY OF APRIL, A.D. 2016.

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

Authentication: 202105336

Date: 04-06-16

5977345 8300 SR# 20161912001