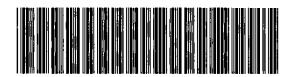
# MICCOCOS

(Requestor's Name)						
(Address)						
` ,						
(Add - )						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(During Falls )						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

Office Use Only



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05/02/16--01022--014 \*\*125.00

SECRETARY OF STATE

MAY 04 2016 S. YOUNG

## OBJECT LEGAL INCORPORATED 5850 GRANITE PARKWAY, SUITE 215 PLANO TX 75024

TEL: 844-386-0178

FAX: 214-317-4754

EMAIL: zoe@legalinc.com

#### DOCUMENT FILING REQUEST LETTER

Date Mailed: 4/27/2016

From: Zoe Dickson

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Name of Company: Nano-Dye Technologies LLC

Please file the attached formation documents, and return the following:

[1] Plain Copy of the filed documents

\*\*Please Fax/Email a copy of the filed documents upon acceptance of filing, if you have any questions on the filing please call me or email me at the number and email listed above\*\*

PLEASE RETURN FILED DOUCMENTS TO:
OBJECT LEGAL INCORPORATED
5850 GRANITE PARKWAY, SUITE 215
PLANO TX 75024

#### **COVER LETTER**

TO:

Registration Section

Div.	Division of Corporations						
SUBJECT:	Nano-Dye Technologies LLC						
	Name of Limited Liability Company						
		reign Limited Liability Comp ed to register the above refero					
Please return	all correspondence	concerning this matter to the	following:				
	Nancy Luna						
	•	•					
	Rocket Lawyer	•					
	Firm/Company						
	5850 Granite Parkway, Suite 215						
	Address						
	Plano, TX 75024						
City/State and Zip Code						نِ بن	
	lon@nano-dye.c	om				15 HNY -2 PH 3: 46	
		E-mail address: (to be used	d for future annual	report not	ification)	-	
For further in	nformation concernin	g this matter, please call:					
Nancy Luna			844 at (	386-017	78		
	Name o	of Contact Person	Area Code	Day	time Telephone Number	-	
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division of Registrati Clifton Br 2661 Exe	ADDRESS:  of Corporations on Section uilding cutive Center Circle ee, FL 32301			
	check for the follow 125.00 Filing Fee	ring amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filii Certified Copy	ng Fee &	□ \$160.00 Filing Fee, Cof Status & Certified Co		

#### 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. Nano-Dye Technologie	es LLC eign Limited Liability Company; must include "I	imited Liability Company ""I I C " or "I I	<u>C")</u>
(Name of Fore	eign Limited Liability Company; must include "I	aimited Liability Company, L.L.C., for "LL	C. 1
(If name unavailable, enter al Liability Company," "L.L.C.	Iternate name adopted for the purpose of transact "or "LLC.")	ing business in Florida. The alternate name m	ust include "Limited
2. Nevada	3 N	V20161157167	
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)	
4	(Date first transacted business in Florida (See sections 605.0904 & 605.0905, F.S. 1	a, if prior to registration.)	
5. 5550 Glades Road, Su		o determine penalty liability)	
Boca Raton, FL 33431			S PER
	(Street Address of Principal Of	fice)	16 THY
6 5550 Glades Road, Sui	te 500ND		
Boca Raton, FL 33431			-2 SEE
	(Mailing Address)		P
7. Name and <u>street addres</u>	ss of Florida registered agent: (P.O. Box N	OT acceptable)	3. J.
Name:	Lon Negrin	o 3	
Office Address:	5550 Glades Road, Suite 500ND		
	Boca Raton	Florida 33431 (Zip code)	
Registered agent's accep	(City)	(Zip code)	
Having been named as re designated in this applica to complywith the provision	gistered agent and to accept service of proc tion, I hereby accept the appointment as re ons of all statutes relative to the proper and my position as registered agent.	gistered agent and agree to act in this ca	pacity. I further agree
	(Registered agent's	signature)	
8. The name, title or capa	ncity and address of the person(s) who has/h	ave authority to manage is/are:	
Member - Lon Negrin 555	50 Glades Road, Suite 500ND Boca Raton F	FL 33431	
-			<del></del>
O. Attached is a certificate urisdiction under the law of the translator must be su	of existence, no more than 90 days old, duly of which it is organized. (If the certificate is abmitted)  Lon Neg	in a foreign language, a translation of the	ody of records in the certificate under oath
	Signature of an author	rized person	
This document is executed submitted in a document to	in accordance with section 605,0203 (1) (b) the Department of State constitutes a third	), Florida Statutes. I am aware that any fal degree felony as provided for in s.817.155	se information . F.S.
	Lon Negrin		

Typed or printed name of signee

SECRETARY OF STATE



TALLANIASSEE, The S. 4

### 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, NANO-DYE TECHNOLOGIES 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 March 15, 2016, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on April 18, 2016.

Boulous K. Cegewske

BARBARA K. CEGAVSKE Secretary of State

Electronic Certificate
Certificate Number: C20160418-2382
You may verify this electronic certificate
online at http://www.nvsos.gov/