116000004208

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	= #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		·

Office Use Only



400286036414

05/25/16--01020--008 **130.00

16 MAY 23 PM 5: 88

MAY 2 6 2016 Y SULKER



Janice L. Davies
Board Certified Specialist in Estate Planning
and Probate Law, NC
janice.davies@jldavieslaw.com

May 24, 2016

VIA FEDERAL EXPRESS

Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Re: Marsh IB #559 Amway, LLC

Dear Sir or Madam:

Enclosed for *immediate* filing are the following documents with regard to Marsh IB #559 Amway, LLC:

- 1. Certificate of Existence for Marsh IB #559 Amway, LLC;
- 2. Cover Letter; and
- 3. Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida.

Also enclosed is a check in the amount of one hundred and thirty dollars (\$130.00) to cover the filing fee and certificate of status. Once filed, please return the certificate of status to me in the self-addressed, postage paid, federal express envelope provided for that purpose.

If you have any questions or need additional information, please do not hesitate to contact me.

Very Truly Yours,

DAVIES LAW, PLLC

Janice L. Davies

Enclosures

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJI	Marsh IB #559 Amway, LLC		
30001	Name of Limited Liability Company		
	losed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate one, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.		
Please	eturn all correspondence concerning this matter to the following:		
	Janice L. Davies, Esq.		
	Name of Person		
	Davies Law, PLLC		
Firm/Company			
	15720 Brixham Hill Ave, Suite 203		
	Address		
	Charlotte, NC 28277		
	City/State and Zip Code		
	janice.davies@jldavieslaw.com		
	E-mail address: (to be used for future annual report notification)		
For fur	her information concerning this matter, please call:		
	Janice L. Davies 704 295-1001		
	Name of Contact Person Area Code Daytime Telephone Number		
	MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301		
Enclose	d is a check for the following amount: ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & ☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate Certificate of Status Certified Copy of Status & Certified Copy		

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: Marsh IB #559 Amway, 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.") South Carolina (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 1 Sabor De Sal Road St. Augustine, Florida 32080 (Street Address of Principal Office) 1 Sabor De Sal Road St. Augustine, Florida 32080 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Frederick C. Marsh Name: 1 Sabor De Sal Road Office Address: St. Augustine (City) 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 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: Frederick C. Marsh, Manager, 1 Sabor De Sal Road, St. Augustine, FL 32080 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)

Typed or printed name of signee

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.

Frederick C. Marsh

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina, Hereby Certify that:

MARSH IB #559 AMWAY, LLC, a limited liability company duly organized under the laws of the State of South Carolina on May 18th, 2016, with a duration that is at will, has as of this date filed all reports due this office, paid all fees, taxes and penalties owed to the State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to S.C.Code Ann. §33-44-809, and that the company has not filed articles of termination as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 23rd day of May, 2016.

Mark Hammond Secretary of State