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JUN 1 6 2016 S. YOUNG

## **COVER LETTER**

TO:

**Registration Section** 

Div	ision of Corporation	ns				
SURIFCT:	KATIGBAK CPA PLLC					
SOBJECT.	Name of Limited Liability Company					
The enclosed Existence, an	I "Application by For and check are submitted	reign Limited Liability Com ed to register the above refer	pany for Authoriza enced foreign limit	tion to Tra ted liability	msact Business in Florida,"  company to transact busin	Certificate of less in Florida
Please return	all correspondence	concerning this matter to the	: following:			
	JIA WU					
	Name of Person					
	KATIGBAK CPA PLLC					
	Firm/Company					
	6 KELLER STREET					
Address						
	ALBANY, NY	12205				<b>3</b> 29
	City/State and Zip Code					<b>全</b>
AX746@ACCUPRO.CO						
		E-mail address: (to be use	ed for future annual	report not	ification)	
For further in	nformation concernit	ng this matter, please call:				JUNE 14 AH 11: 34
JA	Y GARCIA		347 at (	746-76	06	
	Name	of Contact Person	Area Code	Day	time Telephone Number	'
Div Reg P.C	AILING ADDRESS vision of Corporation gistration Section b. Box 6327 lahassee, FL 32314			Division Registrat Clifton B 2661 Exe	of Corporations ion Section suilding ecutive Center Circle see, FL 32301	
	a check for the follow \$125.00 Filing Fee	ving amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155,00 Filis Certified Copy		■ \$160.00 Filing Fee. C of 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 RUSINESS. IN THE STATE OF FLORIDA:

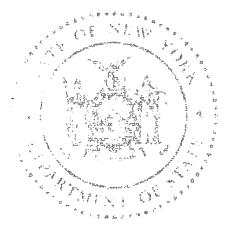
1. KATIGBAK CPA PLLO (Name of Fore	gn Limited Liability Company: must incl	ade "Limited Liability Compar	ny," "L.L.C.," or "LLC.")	
(If name unavailable, enter alt Liability Company," "L.L.C."	ernate name adopted for the purpose of tr	ansacting business in Florida.	The alternate name must in	clude "Limited
2. NEW YORK		A/A		
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI numb	ber, if applicable)	
4. NO TRANSACTIONS				
5. 6 KELLER STREET	(Date first transacted business in 1 (See sections 605.0904 & 605.0905,	Forida, if prior to registration. F.S. to determine penalty liab	) ility)	
ALBANY, NY 12205				
6. 340 S. LEMON AVE, #	(Street Address of Princi	pal Office)		
WALNUT, CA 91789-	2706			ALL SEE
	(Mailing Addre	ss)		- 3-37
7. Name and street address	s of Florida registered agent: (P.O. B	ox NOT acceptable)		
Name:	MATTHEW TUTHILL			# 1 3 3 TE
Office Address:	333 NE 21ST AVENUE, STE 506			2
	DEERFIELD	Florida	33441-3870 (Zip code)	
	(City)	,	(Zip code)	
designated in this applicate to complywith the provision accept the obligations of r	gistered agent and to accept service of tion, I hereby accept the appointment ons of all statutes relative to the prop ny position as registered agent	er and complete performan	gree to act in this capac nce of my duties, and I o	ity. I further agree
JIA WU, MANAGER				<u></u>
333 NE 21ST AVENUE,	STE 506			
DEERFIELD, FL 33441-3	3870			_
9. Attached is a certificate jurisdiction under the law of the translator must be st	of existence, no more than 90 days of of which it is organized. (If the certifical distribution)	d, duly authenticated by the cate is in a foreign language	e, a translation of the cer	of records in the difficate under oath
	Signature of an	authorized person		
This document is executed submitted in a document to	in accordance with section 605.0203 the Department of State constitutes a	(1) (b), Florida Statutes. I a	m aware that any false ir	iformation S.

Typed or printed name of signee

Jła WU

## State of New York Department of State } ss:

I hereby certify, that KATIGBAK CPA PLLC a NEW YORK Professional Service Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 12/18/2008, and that Professional Service Limited Liability Company is existing so far as shown by the records of the Department.



WITNESS my hand and the official seal of the Department of State at the City of Albany, this 06th day of June two thousand and sixteen.

Cetulony Scardina

Executive Deputy Secretary of State