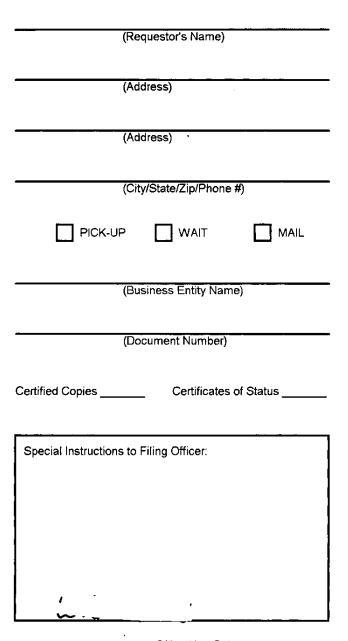
# M16000005242



Office Use Only



500286551295

06/14/16--01009--024 \*\*125.00

TALLAHASSIT TI ORIDA

16 JUN 13 PH

40/1600

### COVER LETTER

то:		ation Section n of Corporation	s									
SUBJEC		obal Elements Co.	nsulting, LLC									
SOBJEC	·!·	Name of Limited Liability Company										
			eign Limited Liability Comp I to register the above refere									
Please re	eturn all	correspondence c	oncerning this matter to the	tollowing:								
		Vera Anderson										
	Name of Person											
	Global Elements, LLC											
		Firm/Company  109 East 17th St, Ste 63  Address										
		Cheyenne, WY	82001				SECR	<u>6</u>				
		City/State and Zip Code										
	vera@globalelementsconsulting.com							ಪ				
			E-mail address: (to be used	I for future annual	report not	ification)		73	U			
For furth	er infor	nation concerning	g this matter, please call:				87	PH 12: 39				
	Vera A	nderson		312 at (	206-10	60	Ji> ' ' '	ည				
		Name o	f Contact Person	Area Code	Day	time Telephone Num	iber					
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		eck for the follow .00 Filing Fee	ing amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filit Certified Copy	ıg Fee &	☐ \$160,00 Filing F of Status & Certific		licate				

### 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. Global Elements, LLC						
(Name of Fore	eign Limited Liability Company; mus	st includ	le "Limited Liab	oility Company," "L.L.C.," or	r"LLC.")	
Global Elements Consulti	ng, LLC					
(It`name unavailable, enter al Liability Company," "L.L.C."	ternate name adopted for the purpose "or "LLC.")		_	s in Florida. The alternate nat	me must include "Limited	
2. Wyoming		3.	27-5262787			
(Jurisdiction under the law company is organized)	of which foreign limited liability			(FEI number, if applicable	:)	
4	(Date first transacted busine	see in Fl	orida if prior to	registration )	_	
	(See sections 605,0904 & 605.	.0905. F	S. to determine	penalty liability)		
5. 1315 Dockside Place					_	
Sarasota, FL 34242						
	(Street Address of I	Principa	l Office)	·, , , , , , , , , , , , , , , , , , ,	_	
6. 109 East 17th St. Ste 63	3				_	
Chevenne, WY 82001					_	
Concycline, ii i (2270)	(Mailing /	Address	)	An Annual And Annual An	一 圣色 5	
7 Namo and street address	s of Florida registered agent: (P.	O Boy	NOT accept	ahla)	三二二	77
•	Vera Anderson	.0, 00.	MOT accept	uoie)		*****
Name:				_	938 5	<u> </u>
Office Address:	1315 Dockside Place			<u>-</u>	平	$\bigcirc$
	Sarasota			, Florida 34242	SI IS	
Registered agent's accep	(City)		•	(Zip code)	55年39	
Having been named as re designated in this applica to complywith the provision	gistered agent and to accept servition, I hereby accept the appoint ons of all statutes relative to the my position as registered agent.	iment a proper	s registered a	gent and agree to act in th	his capacity. I further a	gree
8 The name title or care	icity and address of the person(s)	who h	as/have author	ity ta mangos iclars:		
·	, 1315 Dockside Place, Sarasota,			ity to manage is are,		
	· · · · · · · · · · · · · · · · · · ·			<u> </u>	<del></del>	
	of existence, no more than 90 da of which it is organized. (If the eastern)					
	de	)				
	Signature	of an au	ithorized persor	1	<del>-</del>	
This do manage to account a					ur falon information	
i ma document is executed	I in accordance with section 605.0					

Typed or printed name of signee

Vera Anderson

## STATE OF WYOMING Office of the Secretary of State

I, ED MURRAY, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

#### Global Elements, LLC

is a

### **Limited Liability Company**

formed or qualified under the laws of Wyoming did on **March 1, 2011**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2011-000597910**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 21st day of June, 2016 at 9:22 AM. This certificate is assigned 020428425.



Secretary of State

16 JUN 13 PN 12: 38
SECRETARY OF STATE
AND AMARKS OF STATE

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.