Mbaassyny				
(Requestor's Name) (Address) (Address)	600287511416			
(City/State/Zip/Phone #)	07/06/1601003001 **125.00 ALLANS T-5 AH 7:49			
Special Instructions to Filing Officer:	JUL 0 8 2016 S. YOUNG FILLED S. YOUNG 75 TATE			

COVER LETTER

TO: Registration Section Division of Corporations

R Squared Assets, LLC

SUBJECT: ____

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

 Ravi Patel

 Name of Person

 Firm/Company

 4552 Glen Kernan Parkway E

 Address

 Jacksonville, FL 32224

 City/State and Zip Code

 ravipateImd@yahoo.com

 E-mail address: (to be used for future annual report notification)

 For further information concerning this matter. please call:

Carrie Luck	ลบ	800 3 at (375-2453	
Name of	Contact Person	Area Code	Daytime Tel	ephone Number
MAILING		<u>ST</u>	REET ADDR	ESS:
Division of Corporations	Division of Corporations Division of Cor		vision of Corpo	rations
'Registration Section		Re	gistration Section	on
P.O. Box 6327		Cli	fton Building	
(Tallahassee, FL 32314)		260	51 Executive C	enter Circle
klanne, an frankrik 4' kansenning '' den Kunnede beli fannen beed		Ta	llahassee, FL 32	2301
Enclosed is a check for the following	ng amount:			
	□ \$130.00 Filing Fee &	□ \$155.00 Filing Fe	ee & 🗆 \$160	0.00 Filing Fee, Certificate
	Certificate of Status	Certified Copy	of Stat	us & 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:

	R Squared Assets, LLC		
(Name of Foreign]	Limited Liability Company; must include "Lumited	l Liability Company," "L.L.C.," or "LLC.")
f name unavailable, enter alterna iability Company," "L.L.C," or "	ate name adopted for the purpose of transacting bu "LLC.")	siness in Florida. The alternate name must	include "Limited
Alaska	3.		
(Jurisdiction under the law of w company is organized)		(FEI number, if applicable)	
	(Data first transacted business in Blands, if an	outo constantion	
	(Date first transacted business in Florida, if pr (See sections 605.0904 & 605.0905, F.S. to dete	rmine penalty liability)	
·	1231 W Northern Lights Blvd #9	1	
	Anchorage, Alaska 99503		
	(Street Address of Principal Office)		5. H
	4552 Glen Kernan Parkway E		16 JUL
	Jacksonville, Florida 32224		· 5.
	(Mailing Address)		PH
Name and street address of	Florida registered agent: (P.O. Box NOT ad	ceptable)	13.0
Name:	Ravi Patel		6
Office Address:	4552 Glen Kernan Parkway E		
	Jacksonville	Florida 32224	
	(City)	(Zip code)	
onistared agant's accontant	101		

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 comply with 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.

NAVI Va

(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Ravi Patel, Member, 4552 Glen Kernan Parkway E, Jacksonville, Florida 32224

Reena Patel, Member, 4552 Glen Kernan Parkway E, Jacksonville, Florida 32224

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.

Ravi Patel

Typed or printed name of signee

Alaska Entity #10033163

JUL-5 PH 3:07

State of Alaska Department of Commerce, Community, and Economic Development Corporations, Business, and Professional Licensing

Certificate of Compliance

The undersigned, as Commissioner of Commerce, Community, and Economic Development of the State of Alaska, and custodian of corporation records for said state, hereby issues a Certificate of Compliance for:

R Squared Assets, LLC

This entity was formed on November 03, 2015 and is in good standing. This entity has filed all biennial reports and fees due at this time.

No information is available in this office on the financial condition, business activity or practices of this corporation.



IN TESTIMONY WHEREOF, I execute the certificate and affix the Great Seal of the State of Alaska effective **June 21, 2016**.

Ch Halit

Chris Hladick Commissioner