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(Requ	uestor's Name)	
(Addi	ress)	
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PICK-UP	WAIT	MAIL
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Certified Copies	Certificate	s of Status
Special instructions to Fi	ling Officer:	

Office Use Only



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SUMETARY OF STATE

6 JUL 19 AM 8: 52

TE JUL 19 AH ID: SI

JUL 2 0 2016 Y SULKER CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 220666 7832020

AUTHORIZATION :

COST LIMIT : \$\int 25.00

ORDER DATE: July 19, 2016

ORDER TIME : 9:08 AM

ORDER NO. : 220666-005

CUSTOMER NO: 7832020

FOREIGN FILINGS

NAME: ILAWVENTURES, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

COVER LETTER

то:		tion Section of Corporations	s				
SUBJE		vVentures, LLC					
			Name of L	imited Liability C	Company		
The ene Existen	closed "Ap	plication by Fore	eign Limited Liability Comp to register the above refere	any for Authoriza nced foreign limit	tion to Trai ed liability	nsact Business in Florida," (company to transact busine	Certificate of ss in Florida
Please	return all co	orrespondence co	oncerning this matter to the t	following:			
		Joan Lancellot					
	•		Na	me of Person			
		Inspiras Manage	ement Services, LLC				
			Fir	m/Company			
		8625 Tamiami T	Frail North, Suite 500				
				Address			
		Naples, FL 3410	08				
			City/St	ate and Zip Code			
	j1	ancellot@infilav					
			E-mail address: (to be used	for future annual	report noti	fication)	
For fur	ther inform	ation concerning	this matter, please call:				
	Joan Lar	cellot		239 at (325-440)1	
		Name of	Contact Person	Area Code	Day	time Telephone Number	
	Division Registrat P.O. Box	of Corporations ion Section 6327 see, FL 32314			Division of Registrati- Clifton Bu 2661 Exe	ADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301	
Enclose		ck for the followi 00 Filing Fee	ng amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	ig Fee &	☐ \$160.00 Filing Fee, Cer 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:

(If name unavailable, enter al Liability Company," "L.L.C,"	ternate name adopted for the purp	ose of tra	insacting busine	ss in Florida. The altern	ate nam	e must inc	lude "L	imited
2. Delaware		3.	35-2473956					
(Jurisdiction under the law company is organized)	of which foreign limited liability	5.		(FEI number, if app	licable)			
4. August 1, 2016						_		
	(Date first transacted busi (See sections 605.0904 & 60	iness in F 05.0905	lorida, if prior to F.S. to determin	registration.) e penalty liability)		-		
5. 8625 Tamiami Trail N	·					_		
Naples, FL 34108								
	(Street Address of	of Princip	al Office)			-		
6. 8625 Tamiami Trail No	orth, Suite 500					_		
Naples, FL 34108								
	(Mailin	g Addres	s)				3	
7. Name and street addres	s of Florida registered agent: ((P.O. Bo	x NOT accept	table)		ار الرابع الرابع المواجعة الرابع المواجعة	<u>_</u>	
	Corporation Service Compar			,		12.5		eruna.
Name:		<u> </u>				SEE V.Y.	9	i.
Office Address:	1201 Hays Street			_		יוד.		1 5
						PHONE		
	Tallahassee			_ , Florida		307 71.5	ထဲ	-
Registered agent's accep	(City)			(Zip co	•	LORIDA	₹2 @1	Managery de
Having been named as re designated in this applica to complywith the provision	(City) tance: gistered agent and to accept so tion, I hereby accept the appoi ons of all statutes relative to th my position as registered agen	intment he prope t.	as registered a	(Zip or eabove stated limite agent and agree to ac eperformance of my	ed liabii et in thi duties,	s capacit	any at . y. I fun m famin	rther agree liar with an MS
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Typed or printed name of signee

submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Inspiras Management Services, LLC, By: Jay Rossello, Secretary

Page 1

<u>Delaware</u>

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "ILAWVENTURES, LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS

OF THE NINETEENTH DAY OF JULY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ILAWVENTURES, LLC" WAS FORMED ON THE FIFTEENTH DAY OF JANUARY, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

Authentication: 202679525

Date: 07-19-16