# 116000006573

(Requestor's Name)
(Address)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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SCURETARY OF STATE
TALLAHASSEE. FLORIDA

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K. SALY EXAMINER

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#### **COVER LETTER**

TO: Registration Section

Division of Corporat		,
SUBJECT: FLA		Tovestments HKLL of Limited Liability Company
	Name (	in Elimied Elability Company
The enclosed "Application by F Existence, and check are submi	Foreign Limited Liability Co tted to register the above ref	mpany for Authorization to Transact Business in Florida," Certificate of cerenced foreign limited liability company to transact business in Florida.
Please return all correspondence	e concerning this matter to the	he following:
	VALER)	x BLAZE
		Name of Person
FLAM	ING JAVE	estments HK LLC
		Firm/Company
801	BRINY +	Ave. unit 305
		Address
Pa	MPANO	Beach 33062
<del></del>	City	/State and Zip Code
	6laze	FZE Q YAHOO. COM
	E-mail address: (to be u	sed for future annual report notification)
For further information concern	ing this matter, please call:	
	BLAZE of Contact Person	at ( <u>561)</u> <u>9894789</u> Area Code Daytime Telephone Number
MAILING ADDRES Division.of Corporation Registration Section P.O. Box 6327 Tallahassee, FL 32314	ons	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the follows: \$125.00 Filing Fee	owing amount:  \$\Boxed{\Boxesia} \text{\$\sigma} \text{\$130.00 Filing Fee & Certificate of Status}\$	□ \$155.00 Filing Fee & S\$160.00 Filing Fee, Certificate 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:
1. FLAMING JNVESTMENTS AK. 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.")
2. WYOMING (Jurisdiction under the law of which foreign limited liability)  3. 6/-/79/59/ (FEI number, if applicable)
2. WYOMING (Jurisdiction under the law of which foreign limited liability company is organized)  3. (FEI number, if applicable)
M/A
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 801 BRINY AVE UNIT 305 器 章 TI
Pompavo Beach 33062 (Street Address of Principal Office)
6. BLAZEFZE & YAHOO. COM
(Mailing Address)
7. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)
Name: VALERY OLAZE
Office Address: 801 BRINY Ave. 4nt 305
Office Address: Pompano Beach, Florida 33062 (City) (City)
(City) (Zip code)  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 an 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:  ERMOLAEV ANDREY OWNER RUSSIA SHATURA  OLABRAZE OWNER LATVIA MORES 21 - 4  VALERY BLAZE MANAGER 801 BRINY AVE POMPANO BEACH
dia BLAZE OWNER LATVIA MORES 21-4
ALERY BLAZE MANAGER SOIBRINY AVE POMPANO
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.
WALERY BLAZE
Typed or printed name of signee

## 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,

### Flaming Investments HK LLC

is a
Limited Liability Company

formed or qualified under the laws of Wyoming did on **April 25, 2016** with a delayed effective date of April 26, 2016, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2016-000712789**.

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 5th day of August, 2016 at 1:23 PM. This certificate is assigned 020746521.



Secretary 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.