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(Re	questor's Name)				
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PICK-UP	☐ WAIT	MAIL			
(Bu	siness Entity Name	<del>)</del>			
(Document Number)					
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#### FLORIDA DEPARTMENT OF STATE Division of Corporations

August 26, 2016

JESSICA HAHN 6710 COLLINS ROAD APT 2212 JACKSONVILLE, FL 32244

SUBJECT: ELYSIAN PROPERTY BUYERS, LLC

Ref. Number: W16000055276

We have received your document for ELYSIAN PROPERTY BUYERS, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605:0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

You failed to make the correction(s) requested in our previous letter.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Shelia H Young Regulatory Specialist II

Letter Number: 816A00016841

### COVER LETTER

	tion Section of Corporation	S				
SUBJECT:	Elysia	n Property 1 Name of L	Buyers imited Liability (	LL &	·	
					sact Business in Florida," Certificate of company to transact business in Florida	
Please return all c	correspondence co	oncerning this matter to the f	ollowing:			
		· · · · · · · · · · · · · · · · · · ·	ca He	lhn		
		Na	me of Person			
	Firm/Company					
	(0710 Collins Road, Apt 2212					
Jacksonville, FL 32244 City/State and Zip Code						
_	Jo	hahn @, Elys E-mail address: (to be used	i an Proj for future annual	perty report noti	Buyers, com	
For further inform	nation concerning	this matter, please call:				
	JESSI C Name of	a Hahn Contact Person	at ( <u>G</u> L]   Area Code	<u>527</u> Dayt	-Leo 15 ime Telephone Number	
Division Registra P.O. Bo	NG ADDRESS: of Corporations tion Section x 6327 (see, FL 32314			Division of Registration Clifton But 2661 Execu		
Enclosed is a che	ck for the followi 00 Filing Fee	ng amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filir Certified Copy	ng Fee &	□ \$160.00 Filing Fee, Certificate 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:

	CONCESS IN THE STATE OF FLORIDA.		
1. ELYSIAN PROPERT		nclude "Limited Liability Company," "L.L.C.	" or "[ ] C "
(Maine Of 1 of	eigh Linned Liabinty Company, must h	neiture Elimited Elability Company, E.E.C.	, or DDC. )
Liability Company," "L.L.C.	lternate name adopted for the purpose of "or "LLC.")	f transacting business in Florida. The alternat	e name must include "Limited
2. NEVADA		3	
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applic	able)
4	(Date first transacted business	in Florida, if prior to registration.)	
	(See sections 605.0904 & 605.090	05, F.S. to determine penalty liability)	
5. 6710 COLLINS ROA	D APT 2212 JACKSONVILLE FL	32244	
•	(Street Address of Prin	noisel Office)	<del></del>
6001 ARGYLE FORE	ST BOULEVARD SUITE 21 PMB	•	₹1
6. <u>0001.11.012</u>	OT BOODS TAKE OUT E 211 MB	21) JI OKOOK VIIIII I Z ZZZ-1	
·			
	(Mailing Add	iress)	
7. Name and street address	ss of Florida registered agent: (P.O.	Box NOT acceptable)	80 N L
Name:	BUSINESS FILINGS INCORPO	RATED	
Office Address:	1200 SOUTH PINE ISLAND RO	AD	
	PLANTATION	, Florida 33324	5 5 S
_	(City)	(Zip code	<del>;</del> }
Registered agent's accep		of process for the above stated corpora	rtion at the place designated in
		ed agent and agree to act in this capacity	
		omplete performance of my duties, and	I am familiar with and accept
the obligations of my posi	uion as registerea agent.	<b>2</b>	
Í	Sunno Kuttu	Cast Secretary gent's signature)	<del></del>
8. The name, title or can	· -	no has/have authority to manage is/are:	
	AGER - 6710 COLLINS RD APT 2		
RAMON MEDINA - MA	NAGER - 6710 COLLINS RD APT	2212 JACKSONVILLE FL 32244	
O. Attached is a certificate	of existence, no more than 90 days	old, duly authenticated by the official hav	ving custody of records in the
urisdiction under the law	of which it is organized. (If the certi-	ficate is in a foreign language, a translati	
of the translator must be su	iomitted)		
			<del></del>
(	/	an authorized person	
This document is executed submitted in a document to	kin accordance with section 605.020, the Department of State constitutes	3 (1) (b), Florida Statutes. I am aware tha a third degree felony as provided for in s	it any false information
	JESSICA HAHN - MANAGER		,

Typed or printed name of signee

SECRETARY OF STATE



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, BARBARA K. CEGAVSKE, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **ELYSIAN PROPERTY BUYERS**, **LLC**, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since July 11, 2016, and is in good standing in this state.

A EVADA

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on August 1, 2016.

echana K. Cegenste

BARBARA K. CEGAVSKE Secretary of State

Electronic Certificate
Certificate Number: C20160801-0191
You may verify this electronic certificate
online at http://www.nvsos.gov/