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## SUNSHINE CORPORATE FILING OF FLORIDA INC.

3458 Lakeshore Drive Tallahassee, Florida 32312 (850) 656-4724 SUNSHINECORPORATE2014@GMAIL.COM

Date: 9-20-16
ENTITY NAME:
LAWGIX LAWYERS, LLC
**PLEASE FILE THE ATTACHED AND RETURN:**
Plain Copy
Certified Copy
**PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY:**
Document Number:
Certified Copy of Arts & Amendments
Certificate of Good Standing
**APOSTILLE'/NOTARIAL CERTIFICATION:**
COUNTRY OF DESTINATION 9
NUMBER OF CERTIFICATES REQUESTED
TOTAL AMOUNT OWED: 125
CHECK NUMBER: 2867
PLEASE CONTACT TINA AT 850-508-1891 FOR ANY PROBLEMS OR INFORMATION ON THIS MATTER.
Thank you!
Tina Goff, President

### COVER LETTER

TO:	Registration Section Division of Corporation	3					
SUB IE	Lawgix Lawyers, LI	.c					
SUBJEC	L1:	Name of I	Limited Liability (	Company		•	
The encl Existence	losed "Application by For- e, and check are submitted	eign Limited Liability Comp d to register the above refere	eany for Authoriza enced foreign limi	stion to Tra led liability	nsact Business in Florida," company to transact busin	' Certifica ness in Flo	te of orida
Please re	eturn all correspondence c	oncerning this matter to the	following:				
	Thomas J. Mici	nael, Jr.					
		N	ame of Person	···		•	
	Lawgix Lawyc	s, LLC					
	Firm/Company						
	435 Beaver Str	eet					
	Address						
	Sewickley, PA	15143				<del></del>	
		City/S	tate and Zip Code			SEP	北流
	tomjr@lawgixlav	v.com				20	1555 1555
		E-mail address: (to be use	d for future annua	report not	ification)	AH S	
For furth	ner information concerning	g this matter, please call:				61 :8	25
	URS Agents c/o Kaneth	a Bishop	800 at (	567-43	97	9	1.2
	Name o	f Contact Person	Area Code	Day	rtime Telephone Number	-	
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division Registrat Clifton B 2661 Exc	of Corporations ion Section wilding coutive Center Circle see, FL 32301		
Enclose	d is a check for the follow \$125.00 Filing Fee	ing amount:  \$\Boxed{\Omega} \text{\$130.00 Filing Fee & Certificate of Status}\$	☐ \$155.00 File	_	☐ \$160.00 Filing Fee, C		

### 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.

Lavgix Lavyers, LLC	Sures) iik tue stytesch froiden.		
(Name of For	eign Limited Liability Company; must incl	lude "Limited Liability Company," "L.L.C.," or "I	.I.C.")
(If name unavailable, enter al Liability Company," "L.L.C,	ternate name adopted for the purpose of tr	musacting business in Florida. The alternate name	must include "Limited
2. Pennsylvania	1	. 46-2276103	
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)	
4	Date first transacted business in	Florida if wing to registration	
426 D	(Date first transacted business in (See sections 605,0904 & 605,0905	, F.S. to dotermine penalty liability)	
5. 435 Benver Street			
Sewickley, PA 15143	/b		······································
	(Street Address of Princi	pai Ollice)	on Fr
6,			<b>留</b> 全港
			26 ASK
	(Mailing Addre	351)	
7. Name and street address	se of Florida registered agent; (P.O. B	ox NOT acceptable)	
Name:	URS Agents, LLC	, ,	<b>ထဲ</b> သို့
Office Address:	3458 Lakeshore Drive	······································	<b>5</b>
0111001144,003.	Tallahassee	, Florida 32312	
•	(City)	(Zip code)	1
designated in this applica to complywith the provisi	gistered agent and to accept service of tion, I hereby accept the appointment	of process for the above stated limited liabilit I as registered agent and agree to act in this er and complete performance of my duties, a	capacity. I further agree
	K.135	Kanatha Bishop, Assistant Secretary	
	(Registered a	agent's signature)	
8. The name, title or caps	scity and address of the person(s) who	has/have authority to manage is/are:	
Thomas J. Michael, Jr., M	fember 435 Beaver Street, Sewickle	y, PA 15143	
			<del>*************************************</del>
			<del></del>
			···-··
	of which it is organized. (If the certific	d, duly authenticated by the official having cate is in a foreign language, a translation of t	
This document is executed submitted in a document to	the Department of State constitutes a	(1) (b), Florida Statutes, I am aware that any f third degree felony as provided for in s.817.1	Alse information 55, F.S.
	Thomas J. Michael, Jr.		

Typed or printed name of signee

# COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

09/16/2016

#### TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

Lawgix Lawyers, LLC

is duly registered as a Pennsylvania Professional Limited Liability Company under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.

SECRETARY OF STATE



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written

Secretary of the Commonwealth

Certification Number: TSC160916141125-1

Verify this certificate online at http://www.corporations.pa.gov/orders/verify.aspx