

M16000007613

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

CWO & NOT AVAIL 216-55035

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2016 SEP 26 PM 4:52
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TALLAHASSEE, FLORIDA

K. SALY
SEP 26 2016



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 9, 2016

SUSAN BOND
PARALEGAL SUSAN BOND
P.O. BOX 332
COMSTOCK PARK, MI 49321

SUBJECT: SBOND LLC
Ref. Number: W16000055035

We have received your document for SBOND 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):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Karen A Saly
Regulatory Specialist II

Letter Number: 416A00016744

2016-08-26 15:10:00

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SBond LLC
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:

Susan Bond
Name of Person

Paralegal Susan Bond
Firm/Company

PO Box 332 1405
Address
Port Richey, FL 34673

~~Comstock Park MI 49307~~
City/State and Zip Code

poshkh@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Susan Bond at (616) 516-8484
Name of Contact Person Area Code Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy
- \$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:

1. SBond LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

SafeTransferPoint 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. Michigan
(Jurisdiction under the law of which foreign limited liability company is organized)

3. -
(FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 6915 Harbor Dr. ~~Prudhoe~~
Hudson, FL 34667
(Street Address of Principal Office)

6. PO Box 332
Comstock Park, MI 49321
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Susan Bond

Office Address: 6915 Harbor Drive
Hudson, Florida 34667
(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 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.

Susan Bond
(Registered agent's signature)

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

Susan Bond, Paralegal
PO Box 332
Comstock Park, MI 49321

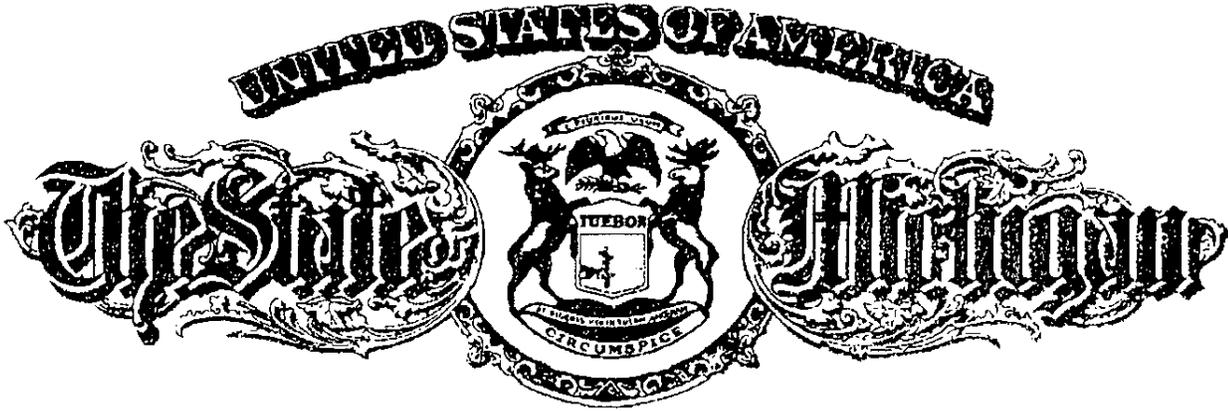
9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

Susan Bond
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.

Susan Bond
Typed or printed name of signee

2016 SEP 26 PM 4:52
DEPT. OF STATE
TALLAHASSEE, FLORIDA



Department of Licensing and Regulatory Affairs

Lansing, Michigan

This is to Certify That

SBOND LLC

FILED
2016 SEP 26 PM 4:52
FACSIMILE TRANSMISSION

was validly organized on March 13, 2013 as a Limited Liability Company. Said Limited Liability Company is validly in existence under the laws of this state and has satisfied its annual filing obligations

This certificate is issued pursuant to the provisions of 1993 PA 23, as amended, to attest to the fact that the company is in good standing in Michigan as of this date.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.



Sent by Facsimile Transmission
1411298

In testimony whereof, I have hereunto set my hand,
in the City of Lansing, this 6th day of September, 2016

Julia Dale

Julia Dale, Director
Corporations, Securities & Commercial Licensing Bureau