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ST. HARRIS

COVER LETTER

TO: Registration Section Division of Corporation	ons						
SUBJECT: Charm		LISTYLES LLC Limited Liability Company			-		
The enclosed "Application by Fo Existence, and check are submit							
Please return all correspondence	-						
A	nna Romera)		·	7017		
	narm Service		s LLC	100 m	2011 OCT 12 F	. 1	
	1422 Seas			2 5 8	PH 3: 07		
Navare, FL 32566 City/State and Zip Code							
E-mail address: (to be used for future annual report notification)							
For further information concerni	ng this matter, please call:						
Anna Ri Name	of Contact Person	at (<u>337</u>) <u>33</u> Area Code Day	30 - 2675 viime Telephone N		-		
MAILING ADDRESS Division of Corporation Registration Section P.O. Box 6327 Tallahassee, FL 32314		Division Registrat Clifton B 2661 Exc	of Corporations ion Section duilding ecutive Center Circ see, FL 32301	:le			
Enclosed is a check for the follo \$125.00 Filing Fee	wing amount: \$\square\text{\$130.00 Filing Fee & Certificate of Status}	☐ \$155.00 Filing Fee & Certified Copy	☑ \$160.00 Filin of Status & Cert			;	

VH



October 5, 2016

ANNA ROMERO 1422 SEASIDE CIRCLE NAVARRE, FL 32566

SUBJECT: CHARM SERVICE INDUSTRIES LLC

Ref. Number: W16000068356

We have received your document for CHARM SERVICE INDUSTRIES LLC and your check(s) totaling \$160.00. However, the document has not been filed and is being retained in this office for the following:

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

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.

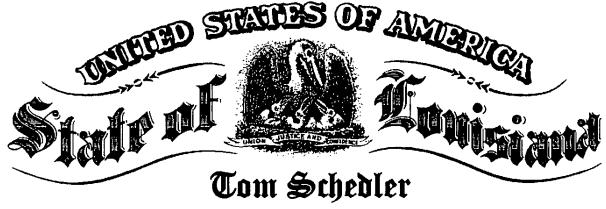
Jenna D Harris Regulatory Specialist II

Letter Number: 816A00021457

*APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION OF COMPANY TO TRANSACT BUSINES	605.0902, FLORIDA STATUTES, THE FOLLOWING IS SS IN THE STATE OF FLORIDA:	S SUBMITTED TO REGISTER A FOREIGN	V LIMITED LIABILITY
_			
(Name of Foreign Li	rice Industries LLC imited Liability Company; must include "Limited Liability Company)	ability Company," "L.L.C.," or "LLC.")	
(If name unavailable, enter alternate Liability Company," "L.L.C," or "L	e name adopted for the purpose of transacting busine LLC.")	ess in Florida. The alternate name must ir	iclude "Limited
2 I puisiana	3 47-	5266235 (FEI number, if applicable)	
(Jurisdiction under the law of whi company is organized)	ich foreign limited liability	(FEI number, if applicable)	
∂	Ctober 3.2016		
	Chober 3, 2016 (Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determine)	to registration.)	
s. 1422 S	easide Circle	no politically internally)	
Navam	<u> </u>		あっ
	(Street Address of Principal Office)		$= \Omega_{0} + i \eta_{+}$
6. 1422 S	easide Circle		72
Navan	e, Fl 32566		
	(Mailing Address)		ယ္ မ်ာ္မ
7. Name and street address of F	Florida registered agent: (P.O. Box NOT accep	otable)	জ জ
Name:	Anna Romero	_	
Office Address:	122 Seaside Circle		
Office Address		225/10	
	Marre (City)	, Florida <u>32566</u> (Zip code)	
Registered agent's acceptance		Landa and IR to IR 1984	dal austra
	ed agent and to accept service of process for t I hereby accept the appointment as registered		
to complywith the provisions of accept the obligations of my po	f all statutes relative to the proper and completed	te performance of my duties, and I a	ım familiar with an
accept the obligations of my po	Much mero		
	(Registered agent's signature	()	
0.77	, , ,	•	
^	and address of the person(s) who has/have author		and El
Anna Romer	o, Manager, 1422	easide Circle, Navi	2110/1-
32566			_
			·
9. Attached is a certificate of ex	istence, no more than 90 days old, duly authent	icated by the official having custody	of records in the
jurisdiction under the law of wh	ich it is organized. (If the certificate is in a fore		
of the translator must be submitted	led)		
-	Conastonero		
	Signature of an authorized personal		
	cordance with section 605.0203 (1) (b), Florida Department of State constitutes a third degree fe		
	Anna Romera	A E	

Typed or printed name of signee



SECRETARY OF STATE

As Secretary of State of the State of Louisiana, I do hereby Certify that

CHARM SERVICE INDUSTRIES LLC

A limited liability company domiciled in LAFAYETTE, LOUISIANA,

Filed charter and qualified to do business in this State on October 09, 2015,

I further certify that the records of this Office indicate the company has paid all fees due the Secretary of State, and so far as the Office of the Secretary of State is concerned, is in good standing and is authorized to do business in this State.

I further certify that this certificate is not intended to reflect the financial condition of this company since this information is not available from the records of this Office.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

October 7, 2016

Secretary of State
Web 42036601K



Certificate ID: 10755790#HHT93

To validate this certificate, visit the following web site, go to Business Services, Search for Louisiana Business Filings, Validate a Certificate, then follow the instructions displayed. www.sos.la.gov

www.sos.al.go