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(Re	equestor's Name)			
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(Ci	ty/State/Zip/Phone	#)		
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(Ві	usiness Entity Nam	e)		
(Document Number)				
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November 15, 2016

CORPORATE ACCESS INC.

SUBJECT: BLUE CASA MOBILE, LLC

Ref. Number: W16000077152

We have received your document for BLUE CASA MOBILE, 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):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

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.

Yasemin Y Sulker Regulatory Specialist II

Letter Number: 816A00024403

Corrected

C	ORPORAT ACCESS	-	
	INC.	236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666	
		WALK IN	
		PICK UP: 11/10	
	CERTIF	FIED COPY	
X	РНОТО	СОРУ	
	CUS		
Ø	FILING	<u>Foreign</u>	
•		CASA MOBILE, LLC NAME AND DOCUMENT #)	
•	(CORPORATE N	NAME AND DOCUMENT #)	
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•	(CORPORATE N	NAME AND DOCUMENT #)	
PECIA NSTRI	AL UCTIONS:		

COVER LETTER

	LUE CASA MOBILE, LLC		
	Name of	Limited Liability Company	
The enclosed "A Existence, and c	Application by Foreign Limited Liability Complete are submitted to register the above reference.	oany for Authorization to Tra enced foreign limited liability	ansact Business in Florida," Certifica y company to transact business in Flo
lease return all	correspondence concerning this matter to the	following:	
	Maria Long		
	N	ame of Person	
	Compliance Solutions, Inc.		
	f	irm/Company	7.754
	242 Rangeline Road		
		Address	
	Longwood, FL 32750		
	City/S	tate and Zip Code	
	mark@csilongwood.com		
	E-mail address: (to be use	d for future annual report no	rification)
or further info	mation concerning this matter, please call:		
Maria	Long	407 260-10	11
1 · · · · · · · · · · · · · · · · · · ·	Name of Contact Person		rtime Telephone Number
Divisio Registr P.O. B	in of Corporations ation Section ox 6327 assee, FL 32314	Division Registrat Clifton B 2661 Exe	of Corporations ion Section duilding ecutive Center Circle see, FL 32301
	eck for the following amount: 5.00 Filing Fee \$\square\$ \$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;

, BLUE CASA MOBILE					
(Name of Fore	ign Limited Liability Company; must inc	clude "Limited Liability Company," "L.L.C.," or "	LLC.")		•
(If name unavailable, enter all Liability Company," "L.L.C."		transacting business in Florida. The alternate name	must inclu	de "Lim	ited
2. CA		_			
(Jurisdiction under the law	of which foreign limited liability	3. (FEI number, if applicable)			
company is organized)					
4	(Date first transacted business in	Florida, if prior to registration.)			
	(acc socitors out a verte mit ave.	5, F.S. to determine penalty liability)			
5. 114 E. Haley Street, Su	site A, Santa Barbara, CA 93101				
	(Street Address of Princ	sipal Office)			
6 114 E. Haley Street, Su	ite A, Santa Barbara, CA 93101	•			
U					
	(Mailing Addr	ress)			
7 Name and street addres	s of Florida registered agent: (P.O. I	Box NOT acceptable)			
	Corporation Service Company				
Name:					
Office Address:	1201 Hays Street			· 00	٠
	Tallahassee	, Florida 32301	#2	VO.	
Registered agent's accept	(City)	(Zip code)	SS	5	garar i
Having been named as re-	gistered agent and to accept service	of process for the above stated limited liabill.	y compan	y a <u>s t</u> hu	plaçe,
designated in this applican	tion, I hereby accept the appointmen	nt as registered agent and agree to act in this ner and complete performance of my duties,	capacity. and Táni t	l filitik Tavistika	er agree r MH ar
	ny position as registered agent.	ner and complete performance of my values,	22		, is the same
,	Corporation Service Company		Ģ.	<u> </u>	
	Sarah Thomas, Assistant Secret	agent's signature)			
O The warms side on some		ary o has/have authority to manage is/are:			
	4 E. Haley Street Suite A Santa Ba				
Howard Brand AMBR 1	14 E. Haley Street Suite A Santa B	arbara, CA 93101			
9. Attached is a certificate	of existence, no more than 90 days of	ild, duly authenticated by the official having co	istody of r	ecords	in the
jurisdiction under the law of the translator must be su		icate is in a foreign language, a translation of t	ne centitic	ate und	er oam
of the translator mass of st	Mindled,	/			
	Storeure of a	n authorized person			
			false infor	mation	
This document is executed submitted in a document to	t in accordance with section 603.020: the Department of State constitutes	3 (1) (b), Florida Statutes. I am aware that any a a third degree felony as provided for in s.817.1	55, F.S.		
	Jeff Compton				
	Typed or print	ed name of signee			

State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME: BLUE CASA MOBILE, LLC

FILE NUMBER: FORMATION DATE:

201626310223

TYPE:

09/14/2016 DOMESTIC LIMITED LIABILITY COMPANY

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of November 9, 2016.

ALEX PADILLA Secretary of State