## M16000006574

(Re	equestor's Name)					
(Address)						
(Ad	ldress)					
(City/State/Zip/Phone #)						
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificates	s of Status				
Special Instructions to Filing Officer:						
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## **COVER LETTER**

Registration Section

TO:

Div	ision of Corporation	is						
SUBJECT:	WORLDWIDE OPTION, LLC							
		Name of Limited Liability Company						
The enclosed Existence, ar	I "Application by For nd check are submitted	eign Limited Liability Comp d to register the above refer	pany for Authoriza enced foreign limit	tion to Tra ed liability	ansact Business in Florida," y company to transact busin	Certificate of ess in Florida		
Please return all correspondence concerning this matter to the following:								
	CELIA MAE P	ERKINS						
	Name of Person							
	N/A							
	Firm/Company							
	16192 COASTAL HIGHWAY							
	Address							
	LEWES, DELAWARE 19958							
	City/State and Zip Code							
	ADMIN@WORLDWIDEOPTION.COM							
		E-mail address: (to be used	d for future annual	report not	tification)			
For further information concerning this matter, please call:								
CELIA MAE PERKINS		941 at (	225-18	81				
- <del>1</del>	Name o	f Contact Person	Area Code	Day	rtime Telephone Number			
Div Reg P.O	ILING ADDRESS: ision of Corporations sistration Section Box 6327 lahassee, FL 32314			Division Registrat Clifton B 2661 Exe	of Corporations ion Section suilding secutive Center Circle see, FL 32301			
	a check for the follow \$125.00 Filing Fee	ing amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	g Fee &	☐ \$160.00 Filing Fee, Co of Status & Certified Cop			

## 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. WORLDWIDE OPTIO	ON, LLC	
(Name of Fore	sign Limited Liability Company; must include "Limited Liability Company," "L.L.	C.," or "LLC.")
N/A		
Liability Company," "L.L.C,"	ternate name adopted for the purpose of transacting business in Florida. The altern " or "LLC.")	ate name must include "Limited
2. DELAWARE	3. 81-3970544	
(Jurisdiction under the law company is organized)	of which foreign limited liability (FEI number, if app	licable)
4. N/A		
<b>4.</b>	(Date first transacted business in Florida, if prior to registration.)	<del></del>
5. 16192 COASTAL HIC	(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
LEWES, DELAWARE		
	(Street Address of Principal Office)	
6. 16192 COASTAL HIG	HWAY	<del></del>
LEWES, DELAWARE	3 19958	
	(Mailing Address)	<del></del>
7. Name and street addres	s of Florida registered agent: (P.O. Box NOT acceptable)	•
Name:	JESSE M. TILDEN	
Office Address:	431 12TH STREET WEST, SUITE 204	
	BRADENTON . Florida 34205	
	(City) (Zip ∞	ode)
designated in this applica- to complywith the provision	gistered agent and to accept service of process for the above stated limite tion, I hereby accept the appointment as registered agent and agree to acoust of all statutes relative to the proper and complete performance of my position as registered agent.	in this capacity. I further agree
	(Registered agent's signature)	
,	ucity and address of the person(s) who has/have authority to manage is/are:	SSEI 16
CELIA MABPERKINS,	MANAGER	
16192 COASTAL HIGH	WAY	1 S 7 F
LEWES, DELAWARE 19	9958	₹ <u></u> 20 0
jurisdiction under the law of the translator must be su  This document is executed	Signature of an authorized person in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware t	ation of the certificate under oath
submitted in a document to	the Department of State constitutes a third degree felony as provided for it CELIA MAE PERKINS	1 5.817.155, P.S.
	Typed or printed name of signee	

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## Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "WORLDWIDE OPTION, LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS

OF THE NINTH DAY OF NOVEMBER, A.D. 2016.

Authentication: 203304943

Date: 11-09-16

6164664 8300

SR# 20166558742