M16000010217

(Re	equestor's Name)	,
(Ad	dress)	
(Ac	ldress)	,
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	<u> </u>
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
<u> </u>		

Office Use Only



200292151242

12/22/16--01001--003 **638.75

12/01/16--01005--002 **160.00



D. SCOTT

ſ



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 6, 2016

KACEY MERCHANT 10921 SW 10 STREET PEMBROKE, FL 33025

SUBJECT: MAGNOBRAIN LLC Ref. Number: W16000080872



We have received your document for MAGNOBRAIN LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this entity is liable for a civil penalty of at least \$500 but not more than \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification. In addition to this civil penalty, the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state are also due. The amount due this office to cover both annual report(s) and penalty fees is \$638.75.

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.

Dionne M Scott Regulatory Specialist II

Letter Number: 516A00025716



COVER LETTER

SUBJECT:		N	1agnobrain, L.L.C	:		
OBJECT:		Name of	Limited Liability	Company		
he enclosed "Appli existence, and check	cation by Fo	reign Limited Liability Comed to register the above refer	pany for Authoriz enced foreign lim	ation to Tr ited liabili	ransact Business in Florida," ty company to transact busin	Certific ess in Fl
lease return all corr	respondence	concerning this matter to the	following:			
			Kacey Merch	ant		
_		N	lame of Person	.		
		1	Magnobrain, L.L.	С		
<u></u>	· · · · · · · · · · · · · · · · · · ·	F	irm/Company			
		1092	1 SW 10 Street			
-	•••		Address			
		Pembrok	e Pines, Florida 3	3025		
_		City/S	tate and Zip Code	:		
			rchant@magnobr			
		E-mail address: (to be use	d for future annua	l report no	rtification)	٠,
or turther informati	on concernin	ng this matter, please call:				,
		Kacey Merchant	954 at (258-86)		``
	Name (of Contact Person	Area Code	Da _y	ytime Telephone Numbe	•
	ADDRESS: Corporations				<u>F ADDRESS:</u> of Corporations	
Registration					tion Section	
P.O. Box 63				Clifton E	Building	•
Tallahassee	, FL 32314				ecutive Center Circle see, FL 32301	
inclosed is a check t	or the follow	ving amount:			E A	16
		□ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & ☐ \$1 Certified Copy of St		12 \$160.00 Filing Fig. Co of Status & Certified Cop	y E
					77	
				95	₩.	
						55

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. Magnobrain LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "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.") , Georgia (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability 11-28-2015
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 10921 SW 10 St Pembroke Pines, Fl 33025 (Street Address of Principal Office) 10921 SW 10 St Pembroke Pines, FL 33025 (Mailing Address) 7. Name and street address of Florida registered agent; (P.O. Box NOT acceptable) Kacey Merchant Name: 10921 SW 10 St Office Address: , Florida 33025 Pembroke Pines (City) 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 wither agree to complywith the provisions of all statutes relative to the proper and complete performance of my duties, and for familiar with and accept the obligations of my position as registered agent. (Registered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Kacey Merchant Co-founder Director of Product Development 10921 SW 10 ST Pembrokes Pines, FL 33025 Kendra Merchant Co-Founder & Director of Education Application 10921 SW 10 ST Pembroke Pines, Fl 3302 Nicola Clarke Morgan Co-Founder & COO 350 Pisgah flats Circle Lexington, South Carolina 29072 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) 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. Kacey Merchant

Typed or printed name of signee

Control Number: 14080847

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

Magnobrain LLC

a Domestic Limited Liability Company

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number
Date Inc/Auth/Filed
Jurisdiction
Print Date
Form Number

31359933

208/12/2014

Georgia

11

308/12/2016

Form Number

Form Number

Fig. 19

