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M. MILLIGAN MAR - 3 2017

COVER LETTER

TO:	O: Registration Section Division of Corporations		
SKYLEMAR PROPERTY MANAGEMENT, LLC SUBJECT: Name of Limited Liability Company			
Please	ease return all correspondence concerning this matter to the following:		
	JANNELYN ELIES		
Name of Person			
SKYLEMAR PROPERTY MANAGEMENT, LLC			
Firm/Company			
	14651 BISCAYNE BLVD. #186		
	Address		
	NORTH MIAMI, FL 33181		
City/State and Zip Code			
INFO@SKYLEMARPM.COM			
	E-mail address: (to be used for future annual report notification)		
For fu	or further information concerning this matter, please call:		
		989-4647	
	Name of Contact Person Area Code	Daytime Telephone Number	
	Division of Corporations Registration Section P.O. Box 6327 Cli Tallahassee, FL 32314 Division of Corporations Re Re P.O. Box 6327 Cli Tallahassee, FL 32314	FREET ADDRESS: vision of Corporations egistration Section ifton Building 61 Executive Center Circle allahassee, FL 32301	
Enclos	nclosed is a check for the following amount: If \$125.00 Filing Fee \$\Bigcup \$130.00 Filing Fee & Certificate of Status \$\Bigcup \$Certified Copy\$	Fee & □ \$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 COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA: SKYLEMAR PROPERTY MANAGEMENT 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.") WYOMING (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) N/A (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 14651 BISCYANE BLVD. #186 NORTH MIAMI, FL 33181 (Street Address of Principal Office) 14651 BISCAYNE BLVD. #186 NORTH MIAMI, FL 33181 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) ALEJANDRO ELIES Name: 14651 BISCAYNE BLVD. #186 Office Address: **NORTH MIAMI** (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 further agree to complywith 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. (Registered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: ALEJANDRO ELIES, MANAGING MEMBER, 14651 BISCAYNE BLVD #186, NORTH MIAMI, FL 33181 JANNELYN ELIES, MANAGING MEMBER, 14651 BISCAYNE BLVD. #186, NORTH MIAMI, FL 33181 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.

Typed or printed name of signee

JANNELYN ELIES

STATE OF WYOMING Office of the Secretary of State

I, ED MURRAY, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

SKYLEMAR PROPERTY MANAGEMENT LLC

is a Limited Liability Company

formed or qualified under the laws of Wyoming did on **February 22, 2017**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2017-000743318**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 3rd day of March, 2017 at 7:53 AM. This certificate is assigned 022385526.



Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.