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Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: INCORP SERVICES INC

Account Number : I20120000007

Phone

: (702)866-2500

Fax Number

: (702)866-2689

\*\*Enter the email address for this business entity to be used for fu annual report mailings. Enter only one email address please

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### Foreign Limited Liability Company Croslin Enterprises, LLC

Certificate of Status	0
Certified Copy	1
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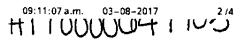
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#### **COVER LETTER**



	Croslin Enterprise	s. LLC		
SUBJECT	T:		Limited Liability Company	
				ansact Business in Florida," Certificate of ty company to transact business in Florid
Please retu	ırn all correspondence	concerning this matter to the	following:	
		Ja	ackie DeFilippis	
		N	ame of Person	
		InCoη	p Services, Inic.	
		FI	rm/Company	
		3773 Howard Hi	ughes Pkwy. · Suite 50	08
	<u> </u>		Address	
		Las Vega	as, NV 89169-6014	
		·	tate and Zip Code	
			ints@incorp.com d for future annual report no	
Ear firetha	r information concernin	g this matter, please call:	o for future annual report no	outcation)
		-	. (900)	246-2677
Jackie -	DeFilippis for InCo	'p Services, Inc.	at ()	ytime Telephone Number
R P	MAILING ADDRESS: Division of Corporation tegistration Section P.O. Box 6327 Callahassee, FL 32314		STREE Division Registra Clifton I	T ADDRESS: of Corporations tion Section
	is a check for the follow	ring amount:  \$\Boxed{\Omega}\$ \$130.00 Filing Fee & Certificate of Status	■ \$155.00 Filing Fee & Certified Copy	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

### 1 09:11:37 a.m. 03-08-2017 37/APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRAIDACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY

			-1					_
If name unavailable, enter ( Liablity Company," "L.L.C	alternate name edop "," or "LLC.")	ted for the purpose of transact	ing business in Florida. Th	e alterna	te nome mu	ıst inclu	ıde "Lir	nited
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4. Upon Registration	(1515	trunsacted business in Florid						
	(See section	605.0904 & 605.0905, F.S.	o determine penalty linbili	(y)				
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Oakland Park		FL	33309					
	(3	Street Address of Principal Of	lice)	<del></del>				
5. 3430 NW 20th Ave								
Oakland Park		FL	33309				7 H	
		(Mailing Address)				7. T	MAR	•
7. Name and street addr	ess of Florida regi	stered agent: (P.O. Box N	OT acceptable)			S0 57	<u> </u>	
Name:	InCorp Serv					inic.	7	
Office Address:	17888 67th C	ourt North			, r		<u> </u>	A MIT
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Typed or printed name of signee

Michael Devlin

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# Commonbrealth of Hirginia



## State Corporation Commission

### CERTIFICATE OF FACT

### I Certify the Following from the Records of the Commission:

That Croslin Enterprises, LLC is duly organized as a limited liability company under the law of the Commonwealth of Virginia;

That the date of its organization is April 27, 2005; and

That the limited liability company is in existence in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.

ORATION COMMISSION 1803

Signed and Sealed at Richmond on this Date: March 8, 2017

Joel H. Peck, Clerk of the Commission

CISECOM

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