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COVER LETTER

TO:	Registration Section Division of Corporation	s				
SUBJE	CCT: 2 Kind Mind, LLC					
		Name of	Limited Liability (Company		
					ansact Business in Florida," Cert y company to transact business i	
Please	return all correspondence c	oncerning this matter to the	following:			
	Louis I. Cole	4.74.7-9614				
		N	ame of Person			
	Louis I. Cole, P.	C.				
		Fi	irm/Company			
	3710 Rawlins St., #950					
			Address			
	Dallas, TX 7521	9				
	- · · · · · · · · · · · · · · · · · · ·	City/S	tate and Zip Code			
	retrojz23@aol.com	m (preferred); cmoomaw@lo				
		E-mail address: (to be used	d for future annual	report not	tification)	
For fur	ther information concerning	this matter, please call:				
	Louis I. Cole		at (214) 884-480	0	
	Name o	Contact Person	Area Code		rtime Telephone Number	
	MAILING ADDRESS:				ADDRESS:	
Division of Corporations				of Corporations		
	Registration Section			_	ion Section	
	P.O. Box 6327			Clifton B		
	Tallahassee, FL 32314				ccutive Center Circle see, FL 32301	
Enclos	ed is a check for the follow	ing amount:				
. 5-56	□ \$125.00 Filing Fee □ \$130.00 Filing Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee,			□ \$160.00 Filing Fee, Certific	ate	
		Certificate of Status	Certified Copy		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:

1. 2 Kind Mind, (Name of Fore	LLC ign Limited Liability Company; must include "Limited Liability Company," "L.L.C.,"	or "LLC.")
Souke, LLC		·
(If name unavailable, enter al Liability Company," "L.L.C,"	ternate name adopted for the purpose of transacting business in Florida. The alternate n	name must include "Limited
2. Texas (Jurisdiction under the law company is organized)	of which foreign limited liability 3. (FEI number, if applicab	ile)
4	(Date first transacted husiness in Florida if prior to registration)	
	(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
5. 405 NW 62nd Street, M	liami, FL 33150	
	(Street Address of Principal Office)	
6. 405 NW 62nd Street, M	iami, FL 33150	
	(Mailing Address)	
	(Maining Address)	Ha m
7. Name and street address	s of Florida registered agent: (P.O. Box NOT acceptable)	
Name:	Laura Harvey	I: OU TATE ORIDA
Office Address:	405 NW 62nd Street	A L
	Miami , Florida 33150 (City) (Zip code)	<u> </u>
designated in this applicate to complywith the provision		this capacity. I further agree
	(Registered agent's signature)	_
Laura Harvey	city and address of the person(s) who has/have authority to manage is/are: , VP & Secretary 405 NW 62nd St, Miami, FL dson Blezin, Pres & Treasurer	33150
2500 N. Hous	ton St., Dallas, TX 75219	
9. Attached is a certificate	of existence, no more than 90 days old, duly authenticated by the official havin of which it is organized. (If the certificate is in a foreign language, a translation	
	Signature of an authorized person	
	I in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that a the Department of State constitutes a third degree felony as provided for in s.8	
	Louis I. Cole Thed or printed name of signee	

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for 2 Kind Mind, LLC (file number 802663274), a Domestic Limited Liability Company (LLC), was filed in this office on March 02, 2017.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on March 03, 2017.



1200

Rolando B. Pablos Secretary of State

Phone: (512) 463-5555 Prepared by: SOS-WEB