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(Requestor's Name)						
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(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
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(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
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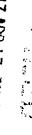


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## COVER LETTER

	ation Section n of Corporations	,					
SUBJECT: SH	ORT PATH 2 SO	LD, LLC					
			Limite	d Liability C	ompany		
						nsact Business in Florida," Certificate of company to transact business in Florida.	
Please return all	correspondence co	oncerning this matter to the	follow	ring:			
	BRENDA RO	BERTSON					
Name of Person							
	SHORT PATH 2 SOLD, LLC						
Firm/Company							
	13002 SEA PINES WAY						
Address							
RIVERVIEW FL 33579							
		City/Si	tate an	d Zip Code			
	brenda_robertsn(	@hotmail.com					
		E-mail address: (to be used	l for f	uture annual	report noti	fication)	
For further infor	mation concerning	this matter, please call:					
BRENDA ROBERTSON		at (	813	335-06	333		
	Name of	Contact Person	Gr (,	Area Code	Dayt	ime Telephone Number	
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314				STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			
Enclosed is a check for the following amount:   \$\square \frac{1}{2}\$\$ \$125.00 Filing Fee \$\square\$ Certificate of Status				3155.00 Filin tified Copy	g Fee &	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy	

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS

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, SHORT PATH 2 SOLD, 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.") 2. NEVADA (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 13002 SEA PINES WAY RIVERVIEW FL 33579 (Street Address of Principal Office) 13002 SEA PINES WAY RIVERVIEW FL 33579 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) **BUSINESS FILINGS INCORPORATED** Name: 1200 SOUTH PINE ISLAND ROAD Office Address: PLANTATION , Florida 33324 (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. Williams AN Business Filings Incorporated (Registered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: BRENDA ROBERTSON, Manager 13002 SEA PINES WAY RIVERVIEW FL 33579 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) 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.

BRENDA ROBERTSON
Typed or printed name of signee

SECRETARY OF STATE



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, BARBARA K. CEGAVSKE, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **SHORT PATH 2 SOLD**, **LLC**, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since March 20, 2017, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on April 4, 2017.

BARBARA K. CEGAVSKE Secretary of State

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Electronic Certificate
Certificate Number: C20170404-2101
You may verify this electronic certificate
online at http://www.nvsos.gov/