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SECRETARY OF STATE

K. SALY MAY - 1 2017

COVER LETTER

то:	Registration Section Division of Corporations					
SHRH	Perfect Partner, LLC					
Name of Limited Liability Company						
The en	losed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate, and check are submitted to register the above referenced foreign limited liability company to transact business in Fl	ate of lorida				
Please	eturn all correspondence concerning this matter to the following:					
	Jane R Moore					
	Name of Person					
	Pertect Partner LLC					
	Firm/Company					
268 Madeira Circle						
Address						
	Tierra Verde, FL, 33715					
City/State and Zip Code						
	kjjk9395@gmail.com					
	E-mail address: (to be used for future annual report notification)					
For fu	ner information concerning this matter, please call:					
	Jane R Moore 859 393 5307 at ()					
	Name of Contact Person Area Code Daytime Telephone Number					
	MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301					
Enclos	d is a check for the following amount: □ \$125.00 Filing Fee □ \$130.00 Filing Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate Copy Certificate of Status Certified Copy □ \$160.00 Filing Fee, 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:

Perfect Partner, LLC			
(Name of Fore	ign Limited Liability Company; must include	de "Limited Liability Company," "L.L.C.," o	or "LLC.")
(If name unavailable, enter all Liability Company," "L.L.C,"		nsacting business in Florida. The alternate n	ame must include "Limited
2 Delaware	3	81-2727216	
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicab	le)
4. 6/1/2017	(Date first transacted business in F)	orida if prior to registration)	
5. 268 Maderia Circle	(Date first transacted business in Fl (See sections 605.0904 & 605.0905, I	F.S. to determine penalty liability)	
Tierra Verde, FL 33715			FILED WING TALLAHASSEE. FLORID.
	(Street Address of Principa	al Office)	F. 50 70 70 70 70 70 70 70 70 70 70 70 70 70
6. 268 Madeira Circle	*********		- 50 70 1
Tierra Verde, FL 33715			Sylve II
	(Mailing Address	\$)	FILED FILED
7 N	- AFTI- il i tanad (D.O. De-	. NOT acceptable)	PS =
/. Name and street addres	s of Florida registered agent: (P.O. Box	NOT acceptable)	92 5
Name:	Jane R Morov MOORE	 	
Office Address:	268 Madeira Circle		
	Tierra Verde	, Florida <u>33715</u>	<u></u>
designated in this applicate to complywith the provision	gistered agent and to accept service of tion, I hereby accept the appointment on ons of all statutes relative to the proper ny position as registered agent.	(Zip code) Eprocess for the above stated limited lia as registered agent and agree to act in and complete performance of my duti Bulle ent's signature)	this capacity. I further agree
8. The name, title or capa	icity and address of the person(s) who h	as/have authority to manage is/are:	
Jane R Moore, 268 Madei	ra Circle, Tierra Verde, FL 33715 (AUBR)	
		(ANBR)	
jurisdiction under the law of the translator must be su This document is executed	of which it is organized. (If the certifical abmitted) Again accordance with section 605.0203 (In the Department of State constitutes a the section of the Department of State constitutes a the department of state constitutes as the department of state constitutes as the section of the Department of State constitutes as the section of the department of state constitutes as the section of the s	l) (b), Florida Statutes. I am aware that a hird degree felony as provided for in s.8 MooRE	of the certificate under oath

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Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "PERFECT PARTNER LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS

OF THE THIRTEENTH DAY OF APRIL, A.D. 2017.





6038227 8300

SR# 20172483613

Authentication: 202376352 Date: 04-13-17

You may verify this certificate online at corp.delaware.gov/authver.shtml