## MMWW66

(Requ	uestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies		
Special Instructions to Fi	iling Officer	
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SECRETARY OF STATE TALLAHASSEE FLORID

MAY 12 2017 S. YOUNG

HAY II MID

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

	ACCOUNT NO.	:	I2000000195	
	REFERENCE	:	635988 8113207	
	AUTHORIZATION	:	Spelle le ma-	
	COST LIMIT	:	\$ 125.00	
ORDER DATE :	May 10, 2017			
ORDER TIME :	9:39 AM			古: 芦笛
ORDER NO. :	635988-005			CAH
CUSTOMER NO:	8113207			MAY 11 MHIO: 54
FOREIGN FILINGS  5				
NAME:	CHARLOTTEJAME	es i	JLC .	
XXXX QUALIFICATION (TYPE: <u>LL</u> )				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER:

CERTIFICATE OF GOOD STANDING

CERTIFIED COPY
PLAIN STAMPED COPY

## **COVER LETTER**

TO:	Registration Section Division of Corporati	ons				
SHRII	CharlotteJames L	LC				
50201	SUBJECT: Name of Limited Liability Company					
		oreign Limited Liability Comp tted to register the above refere				
Please	return all correspondence	e concerning this matter to the	following:			
	Charlene T. 1	Davé				
		N	ame of Person			
	CharlotteJan	esLLC				
		Fi	irm/Company			
	2900 W. And	lerson Lane, Suite C-200/236				- F0
	<del> </del>		Address			7
	Austin, Tx 7	3757				T HAY I
		City/S	tate and Zip Code			- CE
	charlene@cha	rlottejamesworld.com				NSEE FLORIDA
		E-mail address: (to be used	d for future annual	report not	tification)	\$ P
For fu	ther information concern	ing this matter, please call:				
	Charlene T. Davé		808 at (	927-75 _)		_
	Name	e of Contact Person	Area Code	Day	rtime Telephone Number	
	MAILING ADDRES Division of Corporation Registration Section P.O. Box 6327 Tallahassee, FL 32314	ns		Division Registrat Clifton B 2661 Exc	of Corporations ion Section suilding ecutive Center Circle see, FL 32301	
Enclos	ed is a check for the folloud \$125.00 Filing Fee	owing amount:  \$\Boxed\$\$ \$\\$130.00\$ Filing Fee &  Certificate of Status	☐ \$155.00 Filid Certified Copy	_	☐ \$160.00 Filing Fee, C of Status & Certified Co	

## • 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:

CharlotteJames LLC			
(Name of Fore	ign Limited Liability Company; must includ	e "Limited Liability Company," "L.L.C.," or "l	JLC.")
N/A			<del></del>
(If name unavailable, enter al Liability Company," "L.L.C,"		sacting business in Florida. The alternate name	must include "Limited
2. De		82-1193598	
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)	
4. Upon Qualification			
	(Date first transacted business in Flo (See sections 605.0904 & 605.0905, F	orida, if prior to registration.)	
5. 2900 W. Anderson Lar			
Austin, TX 78757	· · ·		
<del></del>	(Street Address of Principal	Office)	
6. same as above			1 A. A. C.
	• · · · · · · · · · · · · · · · · · · ·		F KAY 11
	(Mailing Address)	)	- SS
7. Name and street addres	s of Florida registered agent: (P.O. Box	NOT acceptable)	P FISC
Name:	Chris Griffin		T CST
Office Address:	5858 Lakehurst Dr.	· · · · · · · · · · · · · · · · · · ·	AH 10: 54
	Orlando	. Florida 32819	-
	(City)	(Zip code)	
designated in this applica to complywith the provision	gistered agent and to accept service of p tion, I hereby accept the appointment a	process for the above stated limited liabili is registered agent and agree to act in this and complete performance of my duties,	capacity. I further agree
	/s/ Chris Griffin		
	(Registered age	ent's signature)	
8. The name, title or capa	city and address of the person(s) who ha	as/have authority to manage is/are:	
Charlene T. Davé, 2900 V	V. Anderson Lane, Suite C-200/236, Aus	stin, Tx, 78757 - Member	
Cathy Wilkin, 2900 W. A	nderson Lane, Suite C-200/236, Austin,	Tx, 78757 - Member	<del></del>
	of which it is organized. (If the certificat	duly authenticated by the official having content is in a foreign language, a translation of	
	/s/ Charlene T. Davé		
	Signature of an au	uthorized person	
This document is executed submitted in a document to	in accordance with section 605.0203 (1 the Department of State constitutes a th	) (b), Florida Statutes. I am aware that any ird degree felony as provided for in s.817.	false information 155, F.S.
	Charlene T. Davé		
	Typed or printed n	name of signee	

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "CHARLOTTEJAMES 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 TENTH DAY OF MAY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CHARLOTTEJAMES LLC" WAS FORMED ON THE TENTH DAY OF APRIL, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

JAITITY W. BARNER, Secretary of State

6316911 8300 SR# 20173320376 Authentication: 202517421

Date: 05-10-17