M1700000421S

| (Requestor's Name) | | | | |
|---|---------------|-------------|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificate | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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D. SCOTT MAY 19 2017

COVER LETTER

| Division of Corporation | ns | | • | | |
|---|------------------------------|---------------------------------------|---|--|--|
| SUBJECT: Fuji | Marketine Name of | and Mana Cimited Liability Company | agement, LLC | | |
| The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida | | | | | |
| Please return all correspondence concerning this matter to the following: | | | | | |
| | Veronica | TSA1 | | | |
| Fuji Marketing and Hanagement, LLC | | | | | |
| 5500 Military Trail Ste 22-341 | | | | | |
| Jupiter, FL 33458 City/State and Zip Code | | | | | |
| Fujimarketing @ gmail. com E-mail address: (to be used for future annual report notification) | | | | | |
| For further information concerning | ng this matter, please call: | | 過過 | | |
| Veronica | of Contact Person | at (SO) Area Code Day | time Telephone Number 22 | | |
| MAILING ADDRESS Division of Corporation | | | ADDRESS: 78 Of Corporations | | |
| Registration Section | 5 | Registrati | ion Section | | |
| P.O. Box 6327 Tallahassee, FL 32314 | | | uilding coutive Center Circle see, FL 32301 | | |
| Enclosed is a check for the follow ☐ \$125.00 Filing Fee | \$130.00 Filing Fee & | □ \$155.00 Filing Fee & | □ \$160.00 Filing Fee, Certificate | | |
| | 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 60: COMPANY TO TRANSACT BUSINESS . | | LOWING IS SUBMITTED TO REGIST | ER A FOREIGN LIMITED LIABILITY |
|---|--|--|-----------------------------------|
| 1. Fuji Mark | Eting and H | anasement, | LLC |
| · | | | |
| (If name unavailable, enter alternate name adopte 2. (Jurisdiction under the law of which foreign | Lonins | 3. 27-46 | 79685 Doer, if applicable) |
| 4. (Date (See | e first transacted business in Florida, if prior to resections 605.0904 & 605.0905, F.S. to determine | gistration.) | |
| 5. 412 N Main | St Steloo | 6 5500 Milito | rytrail |
| Buffalo, WY 8 | \$2834 | Ste 22.34 Jupiter | 1 33458 |
| 7. Name and street address of Flo | rida registered agent: (P.O. Box | NOT acceptable) | |
| Name: | Pronica TSAI | | |
| Office Address: 55 | 00 Military To | a:15/e22-341 | |
| | Jupites | , Florida 334 | 58 |
| designated in this application, I h | I agent and to accept service of privereby accept the appointment as all statutes relative to the proper a position as registered agent. | registered agent and agree to act | in this capacity. I further agree |
| | (Registered agent's sig | gnature) | 一概之一 |
| 8. The name, title or capacity and <u>Title or Capacity:</u> | d address of the person(s) who has. Name and Address: | /have authority to manage is/are: Title or Capacity: | Name and Address: |
| tanosins Hember | Veronics 15A1 BITHORIBETY CAY BUTHER PL 3345 | 8 | 72 70 |
| ************************************** | | | |
| (Use attachments if necessary) | | | |
| | (9t | | |
| | accordance with section 605.0203 partment of State constitutes a thir | (1) (b), Florida Statutes. I am awa | |
| | Typed or p | rinted name of signee | |

STATE OF WYOMING Office of the Secretary of State

I, ED MURRAY, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

Fuji Marketing and Management LLC

is a **Limited Liability Company**

formed or qualified under the laws of Wyoming did on **January 24, 2011**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2011-000595894**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 14th day of May, 2017 at 8:46 AM. This certificate is assigned 023078829.



Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.