M17000006347

(Re	questor's Name)	
(Ad	dress)	
•	,	
(Ad	dress)	
(Cit	y/State/Zip/Phone	≘ #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(5)	cument Number)	
(00	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



800301692648

17 JUL 26 PH 12: 34

7 JUL 26 AHII: II

S. WARREN JUL 27 2017

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

7/26/17

NAME:

SATISFACTION GUARANTEED, LLC

TYPE OF FILING: APPLICATION

COST: 125.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO:

TO:	Registration Section Division of Corporat	ions					
SUBJEC	Satisfaction Guar	anteed, LLC					
	····	Name o	of Limited Liability (Company			
The encl Existenc	osed "Application by F e. and check are submi	oreign Limited Liability Cort tted to register the above refe	npany for Authoriza erenced foreign limit	tion to T ed liabili	ransact Business in Florida," Certif ity company to transact business in	īcate o Florida	
Please re	turn all correspondence	e concerning this matter to th	ie following:				
	Peter A Marc	finty, Esquire					
			Name of Person				
	Belmont Inve	estment Corp.					
		Firm/Company					
	1400 N. Prov	1400 N. Providence Road, Bldg 1, Suite 304					
	Address						
	Media, PA 19	0063					
		City/	State and Zip Code		·····		
	hbelmont@belr	montinvestment.com					
		E-mail address: (to be use	ed for future annual i	report no	titication)		
For furthe	er information concerni	ng this matter, please call:					
	Peter A Mardinly		610 at (891-98			
-	Name	of Contact Person	Area Code	Day	rtime Telephone Number		
! !	MAILING ADDRESS Division of Corporation Registration Section P.O. Box 6327 Fallahassee, FL 32314	<u>:</u> is	! !	Division Registrat Clifton B 2661 Exe	CADDRESS: of Corporations ion Section uilding reutive Center Circle see, FL 32304		
	is a check for the follov ■ \$125.00 Filing Fee	ving amount: ☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Certified Copy	Fee &	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy	17 80	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPHANCE WITH SECTION 605,0902, FLORIDA STATUTES THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN TIMITED LIABILITY COMPANYTOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

(It name unavailable, enter alternate						
		iness in Florida. The alternate name must include "Limi	ted Unability Company," "E.L.C," or "LLC")			
2 United States Virgin Islands Durashetton under the law of which foreign limited liability company is organized)		3. 66-0686677	J			
() in isduction taster the law of	мися золети пиштей нарний солибату в облит	(F)	I number, if applicable)			
4. May 19, 2017						
	(Date first transacted business in Florida (See sections 605 0904 & 605 0905, F.S.)	if prior to registration) to determine penalty hability)				
5. c/o Barry J Belmont		6. c/o Belmont Investme	nt Com.			
(Street Address of Principal Office)		(Mailu	ig Address)			
215 SE 8th Avenue, Unit PH-4		1400 N. Providence R	d., B1, Suite 304			
Fort Lauderdale, FL 33301		Media, PA 19063				
	ess of Florida registered agent: (P. Belmont Investment Corp dba	·	17 JU			
Name:	between the state of p doa	weston Leasing				
Office Address:	1675 Market Street, Suite 213		26 AP			
	Weston	33336	ipcodel Collins			
	(City)	, Florida <u>33326</u>	ip code)			
nd accept the obligation	Peter A Mardinly, Vice Presider	1:1	au)			
 The name, title or cap: <u>Title or Capacity:</u> 	acity and address of the person(s) Name and Address:	who has/have authority to manage is/ar <u>Title or Capacity:</u>	re: Name and Address:			
32MJ/M \$ 15 7 4	Barry J Belmont, Truste		Peter A Mardinly			
Sole Member		reamonized regent				
	1675 Market St, Suite 2 Weston, FL 33326	213	1400 N Providence Rd 304 Media, PA 19063			
	1675 Market St, Suite 1	<u></u>				
	1675 Market St, Suite 1	213				
	Weston, FL 33326	<u></u>				
Use attachments if necessing a certificate arisdiction under the law of the translator must be sure. This document is executed.	sary) of existence, no more than 90 day of which it is organized. (If the cerubmitted) uted in accordance with section 60.	s old, duly authenticated by the officia rtificate is in a foreign language, a trans 5.0203 (1) (b). Florida Statutes, I am a es a third degree felony as provided for	Media, PA 19063 I having custody of records in the slation of the certificate under oath			
Use attachments if necessing a certificate arisdiction under the law of the translator must be sure. This document is executed.	sary) of existence, no more than 90 day of which it is organized. (If the certification accordance with section 60 the Department of State constitute.	s old, duly authenticated by the officia tificate is in a foreign language, a trans 5.0203 (1) (b). Florida Statutes, I am a	Media, PA 19063 I having custody of records in the slation of the certificate under oath			

Typed or printed name of signee

GOVERNMENT OF THE VIRGIN ISLANDS OF THE UNITED STATES

CHARLOTTE AMALIE, ST. THOMAS, VI 00802

OFFICE OF THE LIEUTENANT GOVERNOR

CERTIFICATE OF EXISTENCE

To Whom These Presents Shall Come:

I, OSBERT E. POTTER, Lieutenant Governor of the Virgin Islands, do hereby certify: SATISFACTION GUARANTEED, LLC filed Articles of Organization with the Office of the Lieutenant Governor on November 8, 2006 and the Company is duly organized under the laws of United States Virgin Islands;

That the duration of this Limited Liability Company is perpetual;

That the company has paid all applicable fees to date: and

That Articles of Termination have not been filed by the company.



In Witness Whereof, I have hereunto set my hand and affix the seal of the Government of the United States Virgin Islands, at Charlotte Amalie, this 18th day of July, A.D. 2017,

OSBERT E. POTTER

Lieutenant Governor of the Virgin Islands

