

117000006692

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

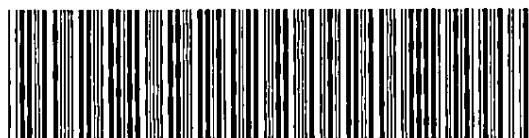
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
AUG -2 2017  
JUL 20 2017

D SCOTT  
AUG 7 2017

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: INVESTMENTSOLUTIONS4U LLC  
Name of Limited Liability Company

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:

Wayne Salas / Victoria Heredia  
Name of Person

Real Estate  
Firm/Company

700 S. Harbour Island Blvd Unit 533  
Address

Tampa, FL 33602  
City/State and Zip Code

investmentsolutions214@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Victoria Heredia at ( 813 ) 468-0910  
Name of Contact Person Area Code Daytime 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:

- ☒ \$125.00 Filing Fee    ☐ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy    ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

FILED  
17  
FEB-27-2019  
TALLAHASSEE, FL

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

IN COMPLIANCE WITH SECTION 605.002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA

1 ALBES/INVESTMENT LLC  
(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "LLC," 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," "LLC," or "LLC")

2 Alaska 3 \_\_\_\_\_  
(Jurisdiction under the law of which foreign limited liability company is organized) (F-I number, if applicable)

4 AL  
(Type first transacted business in Florida, if prior to registration)  
(See sections 605.001 and 605.005, F.S., to determine possible liability)

5 700 S. Harbour Island Blvd unit 533 6 \_\_\_\_\_  
(Street Address of Principal Office) (Mailing Address)  
Tampa, FL 33602

7 Name and street address of Florida registered agent (P.O. Box NOT acceptable)

Name

Wayne Salas

Office Address

700 S. Harbour Island Blvd unit 533

Tampa

Florida

33602

(City)

(Zip code)

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 comply with 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.

[Signature]  
(Registered agent's signature)

8 The name, title or capacity and address of the person(s) who has/have authority to manage is/are

Title or Capacity:

Name and Address:

Title or Capacity:

Name and Address:

Member

Victoria Hernandez  
700 S. Harbour Island Blvd  
unit 533  
Tampa, FL 33602

Member

Wayne Salas  
700 S. Harbour Island Blvd  
unit 533  
Tampa, FL 33602

(Use attachments if necessary)

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)

[Signature]  
Signature of an authorized person

10. 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.

Wayne D Salas

Typed or printed name of signee

# SECRETARY OF STATE



FILED  
JUL 11 2017  
12:36-2 PM  
CLERK

## 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, **INVESTMENT SOLUTIONS 4 U, 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 July 11, 2017.

*Barbara K. Cegavske*

Barbara K. Cegavske  
Secretary of State

Electronic Certificate  
Certificate Number: C20170711-1774  
You may verify this electronic certificate  
online at <http://www.nvsos.gov/>