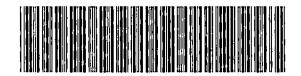
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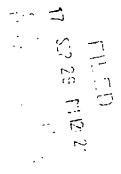
(Re	equestor's Name)				
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(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					
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Office Use Only



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September 25, 2017

Florida Department of State Division of Corporations PO Box 6327 Tallahassee, FL 32314 Attn: Ms. Dionne M Pijeaux

Good Day,

I am responding to your letter (Ref # W1700070617) dated August 28, 2017. It informed me that foreign registry of our LLC was not available in the name we had selected on our application.

I manage the Floribbean Development LLC currently registered in Florida earlier this year (L1700011468). My wish is for the Foreign LLC entity to succeed the existing LLC and become the LLC of record as of this date. Please accept this letter of consent to allow this to occur.

Sincerely,

<sup>2</sup>John R. Anderson

Floribbean Development, LLC

829 Eastview Avenue

Delray Beach, FL 33483

Enclosures:

Letter # 717A00017703

Foreign LLC Application

LLC Original Filing Paperwork (State of Florida)



August 28, 2017

JOHN R ANDERSON 829 EASTVIEW AVE DELRAY BEACH, FL 33483

SUBJECT: FLORIBBEAN DEVELOPMENT, LLC

Ref. Number: W17000070617

We have received your document for FLORIBBEAN DEVELOPMENT, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.  $_{7}$ 

Dionne M Pijeaux Regulatory Specialist

Letter Number: 717A00017703

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

IN COMPILANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN TAMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

FLORIBBEAN DEVE				
(Name of Fore	eign Limited Liability Company; must is	nclude "Limited Liabili	ty Company," "L.L.C.," or	"LLC.")
(If name unavailable, enter al Liability Company," "L.L.C,	ternate name adopted for the purpose o	f transacting business in	n Florida. The alternate nam	ne must include "Limited
2 Nevada		3.		
(Jurisdiction under the law company is organized)	of which foreign limited liability	J	(FEI number, if applicable)	
4	(Data first transpoted business	in Florida if prior to rec	nictration \	-
	(Date first transacted business (See sections 605.0904 & 605.09	05, F.S. to determine pe	nalty liability)	
5. 829 EASTVIEW AVE	DELRAY BEACH, FL 33483			-
<del> </del>	(Street Address of Pri	ncipal Office)		-
6.	<del></del>			-
	(Mailing Ad	J		_
	(Mahing Add	uress)		
7. Name and street address	ss of Florida registered agent: (P.O.	Box NOT acceptabl	e)	
Name:	John R. Anderson	·		
Office Address:	829 EASTVIEW AVE			
	DELRAY BEACH		Florida 33483	<del>-</del>
Registered agent's accep	(City)		(Zip code)	
Having been named as re this application, I hereby	gistered agent and to accept service accept the appointment as registere statutes relative to the proper and c	ed agent and agree to	act in this capacity. If	further agree to comply
	(Registere	d agent's signature)		•
8. The name, title or capa	icity and address of the person(s) wh	ho has/have authority	to manage is/are:	
	829 EASTVIEW AVE DELRAY			i.
	<del></del>			(2 ~~
	<del></del>			)
9. Attached is a certificate	of existence, no more than 90 days of which it is organized. (If the certi	old, duly authenticate	ed by the official having of	custody of records in the
of the translator must be st		incate is in a foreign t	anguage, a translation of	the certificate under oath
	Signature of	an authorized person	<del></del>	
This document is executed	in accordance with section 605.020	•	utes. 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.
	John R. Anderson			

Typed or printed name of signee

SECRETARY OF STATE



## 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, **FLORIBBEAN DEVELOPMENT, 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 July 12, 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 August 17, 2017.

Ballaca K. Cegarste

Barbara K. Cegavske Secretary of State

Electronic Certificate
Certificate Number: C20170817-0866
You may verify this electronic certificate
online at http://www.nvsos.gov/