M 1700009616

,

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer: Spoke to Brandon Shaw who gave permission to add his name and title, and address to application.
Office Use Only



11/05/17--01028--019 **130.00



COVER LETTER

TO: **Registration Section Division of Corporations**

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ravel B С Thaw - Jaker SUBJECT: 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:

	Brandon C	- Maw		
	4	Name of Person		-
	FANTASUI			_
	H	Firm/Company		
) '	190 E WASAN	NGTON ST	#5108	_
		Address		
	FAMPA HUFL	33602	-	
	City/S	State and Zip Code		-
B	SHAW @FAN TAG E-mail address: (to be use	SUITES.COM	•	17
	E-mail address: (to be use	ed for future annual report not	iffication)	8
For further information con	cerning this matter, please call:			
BLAND	Same of Contact Person	at (<u>60%)</u> 279 Area Code Day	time Telephone Number	- 5: - 5:
MAILING ADDI Division of Corpo Registration Sectio P.O. Box 6327 Tallahassee, FL 32	rations on	Division Registrat Clifton B	ADDRESS: of Corporations ion Section uilding cutive Center Circle	. 37
rananassee. FL J2			see, FL 32301	
Enclosed is a check for the				
□ \$125.00 Filing	Fee S130.00 Filing Fee & Certificate of Status	□ \$155.00 Filing Fee & Certified Copy	 I \$160.00 Filing Fee, 0 of Status & Certified Co 	

Fax Message

То:	Attn Brittany Figueroa		
Fax:	+1 850 2456030		
From:	brandon shaw		
Phone:	6082791548		
Email:	Brandoncshaw1990@gmail.com		
Date:	2017/11/14 12:26 Eastern Time		
Pages:	1 of 4 (including this page)		

Shaw Estate & Travel LLC

- 1. Standing certification
- 2. Copy of agent signature

Can you please email me when you have received it please?

Brandoncshaw1990@gmail.com

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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 6, 2017

BRANDON SHAW 1190 E WASHINGTON ST #8108 #510も TAMPA, FL 33602 US

SUBJECT: SHAW ESTATE & TRAVEL LLC Ref. Number: W17000088845

We have received your document for SHAW ESTATE & TRAVEL LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

XThe registered agent must sign accepting the designation.

The jurisdiction under the laws of which the entity is incorporated or organized must be included in the document.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the corrected original and one copy of 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.

BRITTANY M FIGUEROA Regulatory Specialist II Registration/Qualification Section

:- 2:

Letter Number: 417A00022439

Www.sunbiz.org Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314 United States of America State of Wisconsin

DEPARTMENT OF FINANCIAL INSTITUTIONS

Division of Corporate & Consumer Services

To All to Whom These Presents Shall Come, Greeting:

I, Mary Ann McCoshen, Administrator of the Division of Corporate and Consumer Services, Department of Financial Institutions, do hereby certify that

SHAW ESTATE & TRAVEL LLC

is a domestic corporation or a domestic limited liability company organized under the laws of this state and that its date of incorporation or organization is December 21, 2015.

I further certify that said corporation or limited liability company has, within its most recently completed report year, filed an annual report required under ss. 180.1622, 180.1921, 181.1622 or 183.0120 Wis. Stats., and that it has not filed articles of dissolution.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on November 14, 2017.

MARY ANN MCCOSHEN, Administrator Division of Corporate and Consumer Services Department of Financial Institutions

DF1/Com/33

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To validate the authenticity of this certificate

Visit this web address: http://www.wdfi.org/apps/ccs/venty/ Enter this code: 209607-62F0144.

