

117000009790

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

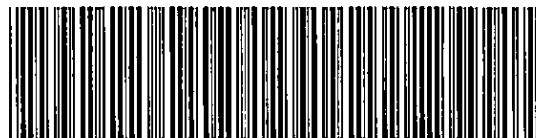
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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S. WARREN

NOV 17 2017



910 Foulk Road, Suite 201, Wilmington DE 19803
Phone: 302-652-4800 • Fax: 302-652-6760
www.corpco.com • info@corpco.com

November 14, 2017

VIA FEDEX

Florida Secretary of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**RE: QUALEVO LLC – Application by Foreign Limited Liability Company for
Authorization to Transact Business in Florida**

Dear Sir or Madam:

Please find enclosed the following for the above referenced entity:

- Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida
- Certificate of Good Standing from domestic state of Delaware
- Check in the amount of \$125.00 to cover the filing fees

Please file the Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida at your earliest convenience and return any evidence of filing to our office via regular mail.

If you have any questions or concerns, please do not hesitate to contact me. Thank you and have a good day

Sincerely,

Amanda Yeaton

Enclosures

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Qualevo 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:

Amanda Yeaton

Name of Person

c/o CorpCo

Firm/Company

910 Foulk Road, Suite 201

Address

Wilmington, DE 19803

City/State and Zip Code

info@corpco.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Amanda Yeaton

302
at ()

652-4800

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

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

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

1. Qualevo LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," 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," "L.L.C.," or "LLC.")
2. Delaware
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 38-4030195
(FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S., to determine penalty liability)
5. 283-289 Draper Street
(Street Address of Principal Office)
Cairns, Queensland 4870 Australia
6. 283-289 Draper Street
(Mailing Address)
Cairns, Queensland 4870 Australia

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

Name: ARD, SHIRLEY AND RUDOLPH, P.A.

Office Address: 207 West Park Ave. Suite B
Tallahassee, Florida 32301
(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 | <u>Qualevo PTY Ltd</u> <u>283-289 Draper Street</u> <u>Cairns, Queensland 4870 AU</u> | | |
| Manager | <u>Paul Lange</u> <u>283-289 Draper Street</u> <u>Cairns, Queensland 4870 AU</u> | | |

(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)

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.

Paul Lange
[Signature]
(Typed or printed name of signer)

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "QUALEVO LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FOURTEENTH DAY OF NOVEMBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "QUALEVO LLC" WAS FORMED ON THE NINTH DAY OF MARCH, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.



6342087 8300

SR# 20177064821

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JBullock", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 203563426

Date: 11-14-17