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J. HARRIS

## **COVER LETTER**

Registration Section

**Division of Corporations** 

TO:

SUBJECT:	SOFTEK EXPORT	r, LLC					
SOBJECT		Name o	f Limited Liability (	Company			-
		reign Limited Liability Cor d to register the above refe					
Please return a	Il correspondence o	concerning this matter to th	ne following:				
	STEVE ECKE	RT	\				
		*	Name of Person				-
	ALL BUSINES	SS DOCUMENTS, INC.	'	\			
			Firm/Company	\	PLEASE	USE	ENCLOSED RETURN. THANK YOU
	2520 GOUGH	STREET		_/_			THANK YOU
			Address				
	SAN FRANCI	SCO, CA 94123					
		City	State and Zip Code				-
	CORPSERVICE	S@ALLBIZDOCS.COM					
	<del></del>	E-mail address: (to be us	sed for future annual	report no	tification)	•	-
For further info	ormation concernin	g this matter, please call:					
STEV	VE ECKERT		855 at (	771 - 2			_
	Name o	of Contact Person	Area Code	Day	time Telephon	e Number	-
Divisi Regist P.O. E	LING ADDRESS: on of Corporations tration Section Box 6327 hassee, FL 32314			Division Registrat Clifton B 2661 Exe	of Corporations ion Section Section Section building secutive Center Case, FL 32301		
	heck for the follow 25.00 Filing Fee	ing amount:  S130.00 Filing Fee & Certificate of Status	■ \$155.00 Filin Certified Copy	g Fee &	□ \$160.00 F of Status & C		

## 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:

(Name of Foreign	Limited Liability Company; must include "Limited	1 Liability	Company," "L.L.C.," or "LLC.")			_
(If name unavailable, enter alternate n	ame adopted for the purpose of transacting business in Flor	rida. The alt	ernate name must include "Limited Link	oility Company," "	L.IC," or "1.	_ LC.")
<sub>2</sub> DELAWARE		3.				
~	hich foreign limited liability company is organized)	٥.	(FEI numb	er, if applicable)	-	<del>-</del>
4.					. 63	
	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determine	registration.	) sability)	<del></del> :	·	ti.
5. 8 THE GREEN STE A	A	6.	4638 TERRY TOWN DRI	VE .		1
(Street Address of	Principal Office)		(Mailing Addr	ess) :	P- )	— L.J. 1.
DOVER, DE 19901			KISSIMMEE, FL 34746		· 🗀	
					3374	
<ol><li>Name and street address</li></ol>	ss of Florida registered agent: (P.O. Box	<u>NOT</u> a	cceptable)	-		
Name:	MARIA R. LONDONO			:	;; 6·	
	4638 TERRY TOWN DRIVE					
Office Address:	4036 FERRI TOWN DRIVE					
	KISSIMMEE		, Florida <u>34746</u>	<del></del>		
Registered agent's accep	(City)		(Zip code	:)		
	M. Aord (Registered gent's	· 				
	(Registered agent's s	ignature)				
8. The name, title or capa <u>Title or Capacity:</u>	acity and address of the person(s) who ha  Name and Address:		uthority to manage is/are: le or Capacity:	Name and	l Addross	•
		1.83	ie or Capacity.	Manie and	i Auui ess	<u>.</u>
MEMBER	MARTHA L LONDONO  4638 TERRY TOWN DRIVE					
	KISSIMMEE, FL 34746	-				
MEMBER	MARIA RILONDONO					
MEMBER	MARIA R LONDONO  4638 TERRY TOWN DRIVE	-				
	4638 TERRY TOWN DRIVE KISSIMMEE, FL 34746	-				
(Use attachments if neces	sary)					
O Attached is a contificate	of aviatance no more than 00 days old	المداد مديدا	antioned by the afficial ba		د	. :_ 41
	of existence, no more than 90 days old, of which it is organized. (If the certificate ubmitted)					
<ol><li>This document is exec submitted in a document to</li></ol>	uted in accordance with section 605.0203 to the Department of State constitutes a thi	(1) (b), rd degre	Florida Statutes. I am aware e felony as provided for in s	that any fal 8.817.155, F.	se informa S.	ition
10. This document is exec submitted in a document to	uted in accordance with section 605.0203 o the Department of State constitutes a thi	rd degre	e felony as provided for in s	s.817.155, F.	se informa S.	ition
10. This document is exec submitted in a document to	uted in accordance with section 605.0203 o the Department of State constitutes a thi	rd degre	Florida Statutes. I am aware e felony as provided for in s	s.817.155, F.	se informa S.	ition

Typed or printed name of signee



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "SOFTEK EXPORT, 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 THIRTEENTH DAY OF NOVEMBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SOFTEK EXPORT, LLC" WAS FORMED ON THE TWENTY-SIXTH DAY OF OCTOBER, A.D. 2017.

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

Authentication: 203555684

Date: 11-13-17