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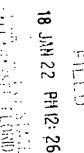
| (Requestor's Name) | | | | | |
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| (Address) | | | | | |
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| (City/State/Zip/Phone #) | | | | | |
| PICK-UP WAIT MAIL | | | | | |
| (Business Entity Name) | | | | | |
| | | | | | |
| (Document Number) | | | | | |
| Certified Copies Certificates of Status | | | | | |
| Special Instructions to Filing Officer: | | | | | |
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Office Use Only



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S. WARREN JAN 2 3 2018

COVER LETTER

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Registration Section

TO:

| Division of Corporations | |
|--|-----|
| SUBJECT: Sales Refertion Services ULC Name of Limited Liability Company | |
| The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certi Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in | |
| Please return all correspondence concerning this matter to the following: | |
| Janes Poran Name of Person | |
| Sales Retention Services Firm/Company | |
| 1510 Stickney Point Rd & Unit 406 Address | |
| Sarasuta Fl 34202 City/State and Zip Code | |
| E-mail address: (to be used for future annual report notification) | |
| For further information concerning this matter, please call: | |
| Tim Poingan at 941 447-2494 Name of Contact Person Area Code Daytime Telephone Number | |
| MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301 | |
| Enclosed is a check for the following amount: \$\Boxed{1} \\$125.00 \text{ Filing Fee} \Boxed{1} \\$130.00 \text{ Filing Fee & \$\Boxed{1} \\$155.00 \text{ Filing Fee & \$\Boxed{1} \\$160.00 \text{ Filing Fee, Certificate of Status}\$ Certified Copy of Status & Certified Copy | ate |

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. Sales R (Name of Foreign L | e fention Services mited Liability Company; must include "Limite | ed Liability Company," "L.1C" or "Ll.C.") | |
|--|---|--|---|
| | h foreign limited liability company is organized) | orida. The alternate name must include "Limited Liah 3. 82-356 | |
| 4. | (Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determ | registration.) | |
| 5. 1510 St (Street Address of Pri | CKney Point Roll | 6. 11523 Palmiling Adding Addi | FI-3502 |
| | of Florida registered agent: (P.O. Box | · · | AH 22 |
| Name: | Janes Purram | | |
| Office Address: | 1510 Stickpay | Point Rd UNI 406 | PH 12: 2 |
| designated in this application to comply with the provision | istered agent and to accept service of jon, I hereby accept the appointment and so of all statutes relative to the proper of my position as registered agent. | s registered agent and agree to act i | in this capacity. I further agree |
| | (Registered agent's | signature) | |
| 8. The name, title or capac <u>Title or Capacity:</u> | ity and address of the person(s) who ha Name and Address: | as/have authority to manage is/are: <u>Title or Capacity:</u> | Name and Address: |
| Partner | James Putran 6707 Byrroun, aut 1 Lyke Mapy Ravin F | 16 se - 3 420 Z | |
| Partur | Luis Piceson 1900 Hurin Busine Surtaide Beach Sc. | 2 Nn. | |
| (Use attachments if necessa | ry) | , - | |
| 9. Attached is a certificate of jurisdiction under the law of of the translator must be sub- | f existence, no more than 90 days old, which it is organized. (If the certifical mitted) | duly authenticated by the official have is in a foreign language, a translation | ving custody of records in the on of the certificate under oath |
| 10. This document is execut submitted in a document to t | ed in accordance with section 605.020 the Department of State constitutes a th | frd degree felony as provided for in s | e that any false information .817.155, F.S. |
| | Signature | of an authorized person | |

STATE OF WYOMING Office of the Secretary of State

I, ED MURRAY, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

Sales Retention Services LLC

is a

Limited Liability Company

formed or qualified under the laws of Wyoming did on **December 1, 2017** with a delayed effective date of January 1, 2018, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2017-000778545**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 23rd day of January, 2018 at 10:20 AM. This certificate is assigned 025304124.

Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.