M18000001295

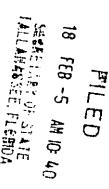
(Re	questor's Name)	
(Ad	ldress)	
	,	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	☐ MAIL
(Bu	siness Entity Nam	e)
(C)	ocument Number)	
(50	zament Namber)	
Certified Copies	_ Certificates	of Status
		
Special Instructions to	Filing Officer:	
		1
	<u> </u>	

Office Use Only



800308537278

02/05/18--01024--018 **125.00



COVER LETTER

TÔ:

TÓ:	Registration Section Division of Corporation	ns				
SUBJI	ECT: THE EAGLE GRO					
		Name of	Limited Liability C	ompany		
					unsact Business in Florida," (y company to transact busine	
Please	return all correspondence of	concerning this matter to the	following:			
	Joseph Ag					
		N	ame of Person			
	THE EAGL	E GROUP ADVANTA	GE, LLC			
		F	irm/Company			
	3270 Chim	ney Dr				
	 		Address	<u></u> -		
	Middleburg, F					
		City/S	tate and Zip Code			
	mail@eanlegro	ipadvantage.com				
		E-mail address: (to be use	d for future annual :	report not	lification)	
For fu	ther information concerning	g this matter, please call:				
	Joseph Aguilar		at (904	, 599-0)773	
	Name o	of Contact Person	Area Code	Day	rtime Telephone Number	
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division Registrati Clifton B 2661 Exe	of Corporations of Section fullding centive Center Circle see, FL 32301	
Enclos	ed is a check for the follow ☑ \$125,00 Filing Fee	ing amount: \$\sum \partial \text{\$130,00 Filing Fee & Certificate of Status}\$	□ \$155,00 Filing Certified Copy	g Fee &	☐ \$160.00 Filing Fee, Ce of Status & Certified Copy	

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

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN TIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

If name unavailable, enter all liability Company," "L.L.C."		opted for the purpose of transac	ting business in Florida. Th	e alternate nan	ne must inc	ud e "L	imited
WYOMING		3					_
(Jurisdiction under the law company is organized)	of which foreign	limited liability	(FEI number	, if applicable	•		
1	(Date fi	st transacted business in Florid	da, if prior to registration.)		_		
	(See section	st transacted business in Florid ns 605 0904 & 605,0905, F.S.	to determine penalty liabilit	<u>y</u> }			
3270 Chimney Dr					-		
Middleburg, FL 32068						Ŕ	
<u></u>		(Street Address of Principal O	ffice)		[2] [2] [2] [3] [3] [4] [4] [4] [4] [4] [4] [4] [4] [4] [4	. .	
3270 Chimney Dr					DX		<u>-</u>
Middleburg, FL 32068	8					<u>က်</u> '	LI I
windsicodig, i E ozook		(Mailing Address)			- ***	<u> </u>	O
7. Name and street addres	<u>s</u> of Florida res	gistered agent: (P.O. Box N	NOT acceptable)		NORBALL PLANT	ਨ	
Name:	Joseph Agu	ilar			>'''	0.1	
Office Address:	3270 Chir	nney Dr					
Since numero.	Middleburg			oneo			
	wildeburg	(City)	, Florida <u>32</u>	(Zip code)	-		
lesignated in this applicat	gistered agent tion, I hereby o ons of all status	and to accept service of pro accept the appointment as re tes relative to the proper an registered agent.	egistered agent and agre	e to act in th	is capacity	. <i>I fi</i> u	rther agr
accipi inc innig in		(Religistered aften)					
	city and addres	(Reflected agents) ss of the person(s) who has/t	nave authority to manage	is/are:			
		(Redistered alicents ss of the person(s) who has/t 3270 Chimney Dr	nave authority to manage Middleburg, FL 3				
8. The name, title or capa	ınager		•	2068			

Typed or printed name of signee

Joseph Aguilar

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,

THE EAGLE GROUP ADVANTAGE, LLC

is a

Limited Liability Company

formed or qualified under the laws of Wyoming did on **December 7, 2017**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2017-000779500**.

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 19th day of December, 2017 at 2:33 PM. This certificate is assigned 024998538.

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.