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TO: Registration Section

Div	ision of Corporation	ns				
SUBJECT:	MICHAEL JAMES	DESIGN LLC				
SUBJECT.	 	Name of I	Limited Liability Com	npany		
				n to Transact Business in Florida." Ce liability company to transact business		
Please returi	all correspondence of	concerning this matter to the	following:			
	MICHAEL O'C	CONNELL				
		N	ame of Person	····		
	MICHAEL JA	MES DESIGN LLC				
Firm/Company						
777 BRICKELL AVE #500-9290						
Address						
	MIAMI, FL 33	131				
		City/S	tate and Zip Code			
	MICHAELJAM	ESOCONNELL@GMAIL.C	СОМ			
		E-mail address: (to be used	f for future annual rep	port notification)		
For further i	nformation concernin	g this matter, please call:				
МІ	CHAEL O'CONNEL	.l.	786 :	538-5082		
	Name o	of Contact Person	Area Code	Daytime Telephone Number		
Div Reg P.C	AILING ADDRESS: vision of Corporations gistration Section b. Box 6327 lahassee, FL 32314	<i>!</i>	Di Re Cl 26	FREET ADDRESS: Evision of Corporations Egistration Section Ifton Building 61 Executive Center Circle Illahassee, FL 32301		
	a check for the follow \$125.00 Filing Fee	ving amount: ☐ \$130.00 Filing Fee & Certificate of Status	S155.00 Filing F Certified Copy	Fee & \$160.00 Filing Fee, Certified Copy	ficate	



January 19, 2018

MICHAEL O'CONNELL 777 BRICKELL AVE #500-9290 MIAMI, FL 33131

SUBJECT: MICHAEL JAMES DESIGN LLC

Ref. Number: W18000005292

We have received your document for MICHAEL JAMES DESIGN LLC and your check(s) totaling \$160.00. However, the document has not been filed and is being retained in this office for the following:

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 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.

Jenna D Harris Regulatory Specialist II

Letter Number: 118A00001179

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(3)

www.sunbiz.org

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

IN COMPILANCE WITH SECTION 605,0902, FLORIDA STATUTEX THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

name unaviolable, enter alternate na		in Florida The	81-2378909 (FEI)			"I.I.C "
MICHAEL O'CONNEL (Street Address of Pr. 5380 SE 4TH PL.	(Date first transacted business in Florida, if pr (See sections 605 0904 & 605 0905, F.S. to d.	_ 3	81-2378909 (FET)			"I.I.C "
MEW YORK (Jurisdiction under the law of white the law of white law of the law of white law of the law of white law of law	(Date first transacted business in Florida, if pr (See sections 605 0904 & 605 0905, F.S. to d.	_ 3	81-2378909 (FET)			
MICHAEL O'CONNER (Street Address of Pr 5380 SE 4TH PL	(Date first transacted business in Florida, if pr (See sections 605 0904 & 605 0905, F.S. to d. J.	_ `	(FEI)	umber, if applicable)	
(Street Address of Pr 5380 SE 4TH PL	,L	ior to registratic	n }			
(Street Address of Pr 5380 SE 4TH PL	,L	ior to registratio etermine penalt	n)			
(Street Address of Pr 5380 SE 4TH PL	,L	etermane person	· healachte · ·			
(Street Address of Pr 5380 SE 4TH PL				ţ		
	methat Crince)	6.	MICHAEL O'CONNEI (Mailing	Address)		
OCALA EL MARO			777 BRICKELL AVE #	500-9290		
OCALACT L 34400			MIAMI, FL 33131			
Name and street address	of Florida registered agent: (P.O.	Box <u>NOT</u>	acceptable)			
Name:	MICHAEL O'CONNELL					2615
Office Address:	777 BRICKELL AVE #500-9290					
	A (1 A A (1					
	MIAMI (City)		. Florida 33131			: 3
comply with the provisio	on, I hereby accept the appointme ns of all statutes relative to the pro of my position as registered agent.	nt as regis. oper and co	for the above stated limi ered agent and agree to c implete performunce of n	ict in this cap	icity. I fu	urthe
comply with the provisio	on, I hereby accept the appointme ns of all statutes relative to the pro	nt as regis. oper and co	ered agent and agree to a	ict in this cap	icity. I fu	urthe
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Typed or printed name of signee

State of New York Department of State } ss:

I hereby certify, that MICHAEL JAMES DESIGN, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 04/25/2016, and that the Limited Liability Company is existing so far as shown by the records of the Department.



WITNESS my hand and the official seal of the Department of State at the City of Albany, this 29th day of January two thousand and eighteen.

Brendan W. Fitzgerald

Executive Deputy Secretary of State

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