M1800001649

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





600309023776

02/15/18--01014--007 **130.00

18 FEB 15 PH 3: 27

J. LEGGETT

COVER LETTER

Division of Corporations
SUBJECT: Addit Course Live, (C
Name of Families Districtly 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:
Jennifer Adair Name of Person
Addir Counseling, LLC Firm/Company
2707 Via Santa Croce Ct.
For Myers, FL 33905 City/State and Zip Code
jadair Courseling I Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jennifer Addic at (207) 713-1987 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{125.00 Filing Fee} \boxed{\sqrt{130.00 Filing Fee & Boxed Certificate}} \Boxed{155.00 Filing Fee & Boxed Certificate} \Boxed{155.00 Filing Fee & Boxed Certificate} \Boxed{160.00 Filing Fee, Certificate} \Boxed{160.00 Filing Fee, Certificate} \Boxed{160.00 Filing Fee}

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

	TON 605.0902, FLORIDA STATUTES, THE FOL SINESS INTHE STATE OF FLORIDA:	LOWING IS SUBMITTED TO REG	ISTER A FOREIGN LIMITED LIABILITY	
I. (Name of Foreign I.	imited Liability Company; must include "Limited	Liability Company," "L.L.C.," or "LLC	2.")	
(If name unavailable, enter alternate nar	ne adopted for the purpose of transacting business in Florid	a. The alternate name must include "Limited	Liability Company," "L.L.C," or "LLC,")	
2. State 4 Marie (Jurisdiction underlying law of who	Q ch foreign limited hability company is organized)	3. EIN#: 410-1	U94090 umber, if applicable)	
4. March 1,	(Date first transacted business in Florida, if prior to reg (See sections 605,0904 & 605,0905, F.S. to determine	sistration.) penalty liability)		
5. 2707 Via Sac	Hacroco Ct.	6. 2707 Yia Sa	inta Croce (+	
For Nuice	F1	Fra Murco	FL.	
	33905		'33905	
7. Name and street address	of Florida registered agent: (P.O. Box)	NOT acceptable)		
Name:	Jennifer Addir			
Office Address:	2707 Yia Santa Cro	ce Ct.		
	FOA MUKIS	, Florida	<u>105</u>	
designated in this applicate to comply with the provision	vistered agent and to accept service of prion, I hereby accept the appointment as one of all statutes relative to the proper a of my position as registered agent. (Registered agent's signification)	registered agent and agree to a nd complete performance of n '	ect in this capacity. I further agree	
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:	
Lauxier	Paul Coscelin			
Ó	She Liobon St.	.		
	1081	•	8 T	
Owner	Jennifer Addic		<u></u>	
	FOA HULCS FL 33905	•	<u> </u>	
(Use attachments if necess	ary)		<u> </u>	
	of existence, no more than 90 days old, do of which it is organized. (If the certificate bmitted)			
	,			
	loonifer A	daic		

Typed or printed name of signee

State of Maine



Department of the Secretary of State

I, the Secretary of State of Maine, certify that according to the provisions of the Constitution and Laws of the State of Maine, the Department of the Secretary of State is the legal custodian of the Great Seal of the State of Maine which is hereunto affixed and of the reports of formation, amendment and cancellation of articles of organization of limited liability companies and annual reports filed by the same.

I further certify that ADAIR COUNSELING LLC is a duly formed limited liability company under the laws of the State of Maine and that the date of formation is December 10, 2012.

I further certify that on:

December 10, 2012 CERTIFICATE OF FORMATION was filed.

No further amendments have been filed to date.

I further certify that said limited liability company has filed annual reports due to this Department, and that no action is now pending by or on behalf of the State of Maine to forfeit the articles of organization and that according to the records in the Department of the Secretary of State, said limited liability company is a legally existing limited liability company in good standing under the laws of the State of Maine at the present time.



Authentication: 5965-724

In testimony whereof, I have caused the Great Seal of the State of Maine to be hereunto affixed. Given under my hand at Augusta, Maine, this fifth day of February 2018.

Matthew Dunlap Secretary of State