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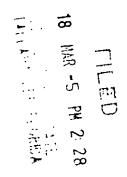
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J. LEGGETT MAR 0 6 2018

## **COVER LETTER**

TO:

то:	Registration Section Division of Corporations				
SUBJE	T: BODYOLOGISTS, L	LC Name of Li	mited Liability Con	прапу	
The enc Existence	osed "Application by Foreign e, and check are submitted to	Limited Liability Compa egister the above referen	ny for Authorization ced foreign limited	n to Trans liability c	sact Business in Florida," Certificate of company to transact business in Florida
Please r	eturn all correspondence conce	rning this matter to the fo	ollowing:		
	Dianna Temple	Nar	ne of Person		
		1141	tte of research		
	BODYOLOGIS	TS, LLC	m/Company		
		ru.	nvCompany		
	4730 S Fort	Apache Rd #300			
			Address		
	Las Vegas, NV	89147			
	· <del></del>	City/Str	ate and Zip Code		
	imanualina@am:	ail com			
	imanyelina@gma E-	mail address: (to be used	for future annual re	port notif	fication)
For fur	her information concerning th	is matter, please call:			
	41- 1 to al		_ at ( 786)	290-70	055
	Angela Lind	ontact Person	Area Code		ime Telephone Number
	raine or C		s	· TREET	ADDRESS:
	MAILING ADDRESS:		<u>\$</u> [	Division o	of Corporations
	Division of Corporations Registration Section		F	Registrati	on Section
	P.O. Box 6327			Clifton Bu	
	Tallahassee, FL 32314				cutive Center Circle ce, FL 32301
Enclos		\$130.00 Filing Fee &	☐ \$155.00 Filing Certified Copy	Fee &	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy
	(	Certificate of Status	Certified Copy		

## 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 ILIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA

BODYOLOGISTS, L	LC gn Limited Liability Company; must in	clude "Limited Liability Company.	""L.L.C.," or "I	LC.")		
					نا به مادرد	_ miled
f name unavailable, enter alliability Company," "L.L.C,"	ernate name adopted for the purpose of or "LLC.")					
Nevada (Jurisdiction under the law company is organized)	of which foreign limited liability	3(FEI number	r. if applicable)	<del></del>	<del></del> - <del></del>	_
	(Date first transacted business (See sections 605.0904 & 605.09	n Florida, if prior to registration.) 05, F.S. to determine penalty liabili	ty)			
4730 S Fort Apache I	Rd #300					
Las Vegas, NV 89	9147	ncipal Office)				
4730 S Fort Apacl				= :	∴ ≅	
4730 3 T 017 Apaci				)	恶	4
Las Vegas, NV 8914	7 (Mailing Ad	dress)		-	;;; 1 ;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;	<u></u> !
Name and street addres	s of Florida registered agent: (P.O.	Box NOTacceptable)				
Nam <b>ć</b> :	Registered Agents Inc.				至 公···	ر'
Office Address:	3030 N. Rocky Point Dr.	STE 150A			28	
-	Tampa	, Florida <u>3</u>	3607			
	(City)		(Zip code)			
designated in this applica to complowith the provisi	stance: egistered agent and to accept service ation, I hereby accept the appointm ions of all statutes relative to the pi my position as registered agent.	ee of process for the above state ent as registered agent and ago oper and complete performand	ed limited liabli ree to act in thi ce of my duties	ity com s capac , and I o	pany at ity. I fu um fami	the place rther agree liar with ar
	Bee Home	ed agent's signature)		-		
	, -	_	e islare:			
	acity and address of the person(s) v	LAS VEGAS, NV 8912	26			
Dianna Temple, Ma	anager PO BOX 27740	LAG VEGAG, IV GG	<u></u>			
			<del></del>			
			<del></del>	<del></del> ·		
<ol> <li>Attached is a certificate jurisdiction under the law of the translator must be:</li> </ol>	e of existence, no more than 90 day of which it is organized. (If the cer submitted)	s old, duly authenticated by the tificate is in a foreign language.	official having , a translation o	custody f the ce	of recortificate	rds in the under oath
		of an authorized person			_	
This document is execute submitted in a document	ed in accordance with section 605.0 to the Department of State constitut	203 (1) (b), Florida Statutes. Lai es a third degree felony as provi	m aware that an ided for in s.811	y false i 7.155, F	nformat .S.	ion
	Dianna Temple					

Typed or printed name of signee

SECRETARY OF STATE



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, Barbara K. Cegavske, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **BODYOLOGISTS**, **LLC**, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since February 9, 2018, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on February 23, 2018.

Bollars K. Cegewske

Barbara K. Cegavske Secretary of State

Electronic Certificate
Certificate Number: C20180223-1363
You may verify this electronic certificate
online at http://www.nvsos.gov/