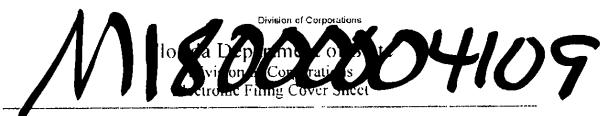
4/27/2018



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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC. Account Number : 120010000062

Phone : (323)962-8600

Fax Number

: (323)962-3889

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. *

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Foreign Limited Liability Company APTBYDESIGN, LLC

Certificate of Status	0
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Page Count	05
Estimated Charge	\$155.00

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COVER LETTER

TO: Registratio Division of	n Section Corporations		-	
SUBJECT: APTE	YDESIGN,L	LC		
SUBJECT:		Nume of Limited	Liability Company	
The enclosed "Appli Existence, and check	cation by Forei are submitted	gn Limited Liability Comp to register the above refere	any for Authorization to Tra need foreign limited liabilit	insact Business in Florida," Certificate of y company to transact business in Florida
Please return all corr	espondence co	ncerning this matter to the	following:	
		Chey	enneMoseley	
		Nu	me of Person	
		Legalz	oom.com, inc.	
		l'ir	m/Company 🛫	
		101 N Bra	nd Blvd 11th Floor	
			Address	
			ale,CA91903	
	<u>-</u>	City/St	ate and Zip Co se	
jay	.oli2@gma			
			for future annual report notifi	cation)
For further informate	on concerning	this matter, please call:		
Cheyen	ne Moseley		at (0888 ext9724
·	Name of	Contact Person	Area Code Di	aytime Telephone Number
Division of Registratio P.O. Box 6		Divisiot Registra Clifton 2661 Ex	T ADDRESS: Fof Corporations ation Section Building security Center Circle ssee, FL 32304;	
Enclosed is a ch ☐ \$125.00		ollowing amount: ☐ \$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy	☐ \$160,00 Filing Fee, Certificate of Status & Certified Copy
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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS. IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA SEXTUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: APTBYDESIGN, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LUL.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C." or "LLC.") 2. DELAWARE (FEI number, il applicable) (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 10570 Knickerbocker Ct. Saint John, IN 46373 (Street Address of Principal Office) 10570 Knickerbocker Ct. Saint John, IN 46373 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) United States Corporation Agents, Inc. Name: 13302 Winding Oak Court Suite A Office Address: :<u>1</u> , Florida ⁻³³⁶¹² Tampa (City) Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to complywith the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and Chayennu Moseley, Assistant Secretary on accept the obligations of my position as registered agent. behalf of United States Corporation Agents, Inc. (Registered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Donald Eugene Baker, member, 10570 Knickerbocker Ct., Saint John, IN 46373 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a for sign language, a translation of the certificate under oath of the translator must be submitted) Signature of an authorized person This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, P.S. Donald Eugene Baker

Typed or printed name of signee

<u>Delaware</u>

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "APTBYDESIGN, LLC" IS DULY FORMED UNDER
THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A
LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF
THE SEVENTEENTH DAY OF APRIL, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "APTBYDESIGN, LLC" WAS FORMED ON THE FIRST DAY OF APRIL, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN.
PAID TO DATE.

5312408 8300 SR# 20182743237

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202524431

Date: 04-17-18