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Certified Copies	Certificates of	Status
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Special Instructions to I	Filing Officer:	
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Office Use Only



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SECRETARIES FLORES,



June 21, 2017

DAVID SEIJO 11811 N TATUM BLVD STE 3031 PHOENIX, AZ 85028

SUBJECT: TUCKER GROUP LLC Ref. Number: W17000043928

We have received your document for TUCKER GROUP LLC and your check(s) totaling \$250.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

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 your document, along with 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.

Letter Number: 617A00012638

Stacey M Warren Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO:	Régistration Section Division of Corporations
SUBJE	T: Tucker Group, LLC Name of Limited Liability Company
	sed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of and check are submitted to register the above referenced foreign limited liability company to transact business in Florida
Please r	urn all correspondence concerning this matter to the following:
	David Seijo Name of Person Tucker Group, LLC Firm/Company
	11811 N Tatum Blvd, Ste 3031
	Phoenix AZ 85028
	Address Phoenix AZ 85028 Chy/State and Zip Code Fredraza. KCP @ gmail. Com Il-mail address: (to be used for future annual report notification)
For furtl	r information concerning this matter, please call:
	David Seijo at 786, 355-4109 Name of Contact Person Area Code Daytime Telephone Number
	AAILING ADDRESS: Division of Corporations Division of Corporations Registration Section CO. Box 6327 Callahassee, FL 32314 Callahassee, FL 32314 Callahassee, FL 32301 Callahassee, FL 32301
Enclosed	s a check for the following amount: \$125.00 Filing Fee

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 LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.I. C.," or "LI.C.") (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,") (FEI number, if applicable) in Florida, if prior to registration.) .0905, F.S. to determine penalty liability) 52 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Office Address: , Florida 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 comply with the provisions of all statute, relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. red agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Title or Capacity: Title or Capacity: Name and Address: Name and Address: (Use attachments if necessary) 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 continuate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) Signiture 1 an authorized person 10. 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, F.S.

Typed or printed name of signee





I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "TUCKER GROUP, 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 TWENTY-NINTH DAY OF MAY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TUCKER GROUP, LLC" WAS FORMED ON THE TWENTY-NINTH DAY OF SEPTEMBER, A.D. 2015.

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

 ${\cal G}$

RECEIVED 018 JUN-1 AM 11:32 CEPARTMENT OF STATE,

5837410 8300

SR# 20184524098



Jeffrey W. Bullock, Secretary of State

Authentication: 202780945

Date: 05-29-18