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SECRETARY OF STATE

M. MILLIGAN
JUN 0 5 2018

COVER LETTER

TO:

TO:	Registration Section Division of Corporations
SUBJI	ELEFANTE WYOMING, LLC
C/(/1301	Name of Limited Liability Company
	closed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of ace, 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:
	MICHAEL A. SCOTT ESQ
	Name of Person
	THE DORCEY LAW FIRM, PLC
	Firm/Company
	10181 SIX MILE CYPRESS PARKWAY, SUITE C
	Address
	FORT MYERS, FL 33966
	City/State and Zip Code
	MIKE@DORCEYLAW.COM
	E-mail address: (to be used for future annual report notification)
For fur	ther information concerning this matter, please call:
	MICHAEL SCOTT 239 418-0169 at ()
	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
Enclos	ed is a check for the following amount: \$\Begin{array}{ c c c c c c c c c c c c c c c c c c c

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

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

If name unavailable, enter alternate	name adopted for the purpose of transacting busine	ss in Florida. The alter	mate name must include "Limited Lic	ability Company," "L.L.C," or "	"I.I (" ")
WYOMING		3			
(Jurisdiction under the law of w	shich foreign limited liability company is organized)	(FEI man	nber, if applicable)	
ł					
	(Date first transacted business in Florida, if (See sections 605,0904 & 605,0905, F.S. to	prior to registration.) determine penalty lia	bility)		
3. 12381 SOUTH CLEV		6. <u>1</u>	2381 SOUTH CLEVELA	AND AVE 😼 🗸	201
(Street Address of SUITE 102	Principal Office)	S	(Mailing Add	dress)	B
FORT MYERS, FL 33	3907	_	ORT MYERS, FL 33907	7 7	3
-		<u>-</u>		<u> </u>	କ ଶ୍
/ Name and street addre	ss of Florida registered agent: (P.C) Boy NOT ac	centable)	E C	≥ !
	DLF REGISTERED AGENT SE		cepiuote,	F1.0	AM 14: 30
Name:	DEI REGISTERED AGENT SE	- CL, LLC		22	<u>မ</u>
Office Address:	10181 SIX MILE CYPRESS PA	RKWAY, C		9	
	FORT MYERS		, Florida <u>33966</u>		
	(City)		(Zip co	ola t	
laving been named as r lesignated in this applica- o comply with the provis		nent as register proper and com	or the above stated limited ed agent and agree to acc	d liability company at t in this capacity. I fu	erther agr
Having been named as r designated in this applica- to comply with the provis	ptance: egistered agent and to accept service ation. I hereby accept the appointn sions of all statutes relative to the p as of my position as registered agen	nent as register proper and com nt.	or the above stated limited ed agent and agree to acc	d liability company at t in this capacity. I fu	erther agr
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Typed or printed name of signee

STATE OF WYOMING Office of the Secretary of State

I, EDWARD A. BUCHANAN, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

Elefante Wyoming LLC

is a

Limited Liability Company

formed or qualified under the laws of Wyoming did on **April 6, 2018**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2018-000797450**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 24th day of May, 2018 at 12:45 PM. This certificate is assigned 026601419.

Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.