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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

(Document Number)

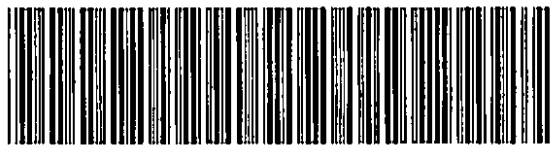
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W18-37280



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05/18/18--01003--005 **46.25

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APR 16 2018

2018 JUN -4 AM 8:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

M. MILLIGAN

JUN 11 2018



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 23, 2018

RACHEL WALL
5454 MARSALA LN
JACKSONVILLE, FL 32244 US

SUBJECT: LITTLE FLOWER EVENTS, LLC
Ref. Number: W18000037280

We have received your document for LITTLE FLOWER EVENTS, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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.

Michelle Milligan
Senior Section Administrator

Letter Number: 518A00010782

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2018 JUN -4 AM 10:51

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL 32314

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Little Flower Events LLC
Name of Limited Liability 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:

Rachel Wall
Name of Person

little flower events
Firm/Company

5454 Marsala LN
Address

Jacksonville FL 32244
City/State and Zip Code

rachel.wall@littleflowerevents.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rachel Wall at (765) 618-7376
Name of Contact Person Area Code Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☐ \$160.00 Filing Fee, 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 LIMITED LIABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Little Flower Events LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(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. North Carolina 3. 82-1105613
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. ~~01/01/2018~~ January 1 2018
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 5454 Marsala LN 6. _____
(Street Address of Principal Office) (Mailing Address)
Jacksonville FL 32244

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Rachel Wall
Office Address: 5454 Marsala LN
Jacksonville, Florida 32244
(City) (Zip code)

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 statutes 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.

R Wall
(Registered 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:	Name and Address:	Title or Capacity:	Name and Address:
<u>Owner</u>	<u>Rachel Wall</u> <u>5454 Marsala LN</u> <u>Jacksonville FL 32244</u>		

(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 certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

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.

R Wall
Signature of an authorized person
Rachel Wall
Typed or printed name of signee

2018 JUN -4 AM 8:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED



NORTH CAROLINA

Department of the Secretary of State

CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

LITTLE FLOWER EVENTS, LLC

is a limited liability company duly formed under the laws of the State of North Carolina, having been formed on the 7th day of April, 2017, with its period of duration being Perpetual.

I FURTHER certify that the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act; and that the said limited liability company has not filed articles of dissolution as of this date of this certificate.



Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 2nd day of April, 2018.

Elaine F. Marshall

Secretary of State