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(Re	questor's Name)		
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(Cit	y/State/Zip/Phone	e #)	
PICK-UP	MAIT	MAIL	
(Bu	siness Entity Nar	ne)	
(Do	cument Number)		
Certified Copies	_ Certificates	s of Status	
Special Instructions to	Filing Officer:		
	Office Use On	ly	ولا

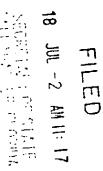
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K. SALY JUL - 6 2018



June 13, 2018

ELIZABETH CANTU 619 SE 6TH AVE PORTLAND, OR 97214

SUBJECT: TRUJILLO MARKETING, LLC

Ref. Number: W18000055368

We have received your document for TRUJILLO MARKETING, 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):

The registered agent must sign accepting the designation.

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.

Jenna D Harris Regulatory Specialist II

Letter Number: 218A00012356

RECENTED

OR JUL -2 AHTH 43

VISION OF COMPET.

COVER LETTER

TO:		tration Section ion of Corporation	18				
SUBJE		rujillo Marketing I	LC				
			Name of I	Limited Liability (Company		
			reign Limited Liability Comp d to register the above refere				
Please re	eturn a	ll correspondence o	concerning this matter to the	following:			
		Elizabeth Canti	1				
			Na	ame of Person			
		Trujillo Market	ing LLC				
			Fi	rm/Company			
		619 SE 6th Ave	enue				
				Address			
		Portland, OR 9	7214				
			City/Si	tate and Zip Code			
		elizabeth,cantu@	ermblackbox.com				
			E-mail address: (to be used	for future annual	report not	ification)	
For furtl	her info	ormation concernin	g this matter, please call:				
	Eliza	beth Cantu		503 at (673-233	32 x 1009	
		Name o	f Contact Person	Area Code	Day	time Telephone Number	
	Divisi Regis P.O. I	on of Corporations tration Section Box 6327 hassee, FL 32314			Division Registrati Clifton B 2661 Exe	ADDRESS: of Corporations ion Section uilding cutive Center Circle ee, FL 32301	
Enclosed		heck for the follow 25.00 Filing Fee	ing amount: ☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filir Certified Copy	ig Fee &	☐ \$160.00 Filing Fee, Cer 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:

f name unavailable, enter alternate r	name adopted for the purpose of transacting business in	Florida. The alternate name must include "Limited	Liability Company," "L.L.C," or "LLC.
Oregon		3 26-3458857	
	hich foreign limited liability company is organized)	(FEI n	umber, if applicable)
Not applicable			
***************************************	(Date first transacted business in Florida, if prior (See sections 605,0904 & 605,0905, F.S. to dete	to registration)	
619 SE 6th Avenue	(See sections 603,0904 & 603,0903, F S to bete		
(Street Address of	Principal Office)	6. (Mailing &	address) *** 🕜 🙃
Portland, OR 97214		· · · · · · · · · · · · · · · · · · ·	
			,,
Name and street addre	ss of Florida registered agent: (P.O. B	ox NOT acceptable)	2
Trans and <u>street addres</u>		on <u>itor</u> accepatore)	
Name:	Shanya Kovacevich		第二十二
Office Address:	201 1/2 39th Avenue S		1 T
31111711111111111	6	2.205	*** *
	Saint Petersburg (City)	, Florida 33705	
aving been named as resignated in this application comply with the provise	registered agent and to accept service of the appointment ions of all statutes relative to the property of my position as registered agent.	t as registered agent and agree to a	ct in this capacity. I furthe
laving been named as re esignated in this applica o comply with the provisi nd accept the obligation	egistered agent and to accept service of tion, I hereby accept the appointment ions of all statutes relative to the prop is of my position as registered agent. Naccept Service Agent	t as registered agent and agree to a per and complete performance of memory of the signature)	ct in this capacity. I furthe y duties, and I am familiar
laving been named as re esignated in this applica o comply with the provisi nd accept the obligation	egistered agent and to accept service of tion, I hereby accept the appointment ions of all statutes relative to the prop	t as registered agent and agree to a per and complete performance of memory of the signature)	ct in this capacity. I furthe y duties, and I am familiar
esignated in this applicate comply with the provision accept the obligation 3. The name, title or capa	egistered agent and to accept service of attion, I hereby accept the appointment ions of all statutes relative to the propers of my position as registered agent. August Vac (Registered agent) Vac (Re	t as registered agent and agree to a ser and complete performance of mention of the signature) has/have authority to manage is/are	ct in this capacity. I furthe y duties, and I am familiar
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State of Oregon

OFFICE OF THE SECRETARY OF STATE

Corporation Division

Certificate of Existence 235H614B4

I. DENNIS RICHARDSON, SECRETARY OF STATE, and Custodian of the Seal of said State, do hereby certify:

TRUJILLO MARKETING, LLC

is

Organized

under the laws of The State of Oregon

and is active on the records of the Corporation Division as of the date of this certificate.



In Testimony Whereof, I have hereunto set my hand and affixed hereto the Seal of the State of Oregon.

DENNIS RICHARDSON, SECRETARY OF STATE

6/4/2018