

M18000007769

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000316856620

08/15/18--01003--006 **160.00

~~08/15/18 01003 006 **160.00~~

FILED
18 AUG 15 PM 5:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

US

307

August 9, 2018

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

RE: Wildcat Ventures, LLC

Dear Sir or Madam:

Enclosed is the following:

1. Check for \$160.00 for Filing fee, Designation of Registered Agent, Certified Copy, and Certificate of Status.
2. Certificate of Good Standing from the State of Colorado.
3. Application

I would like to register my LLC in the State of Florida as a foreign LLC I guess it is called? This is so I can conduct business with my real estate in the State of Florida using my LLC that I use in Colorado.

I am now a resident of Florida and will be conducting most of my business here.

If you have any questions, please don't hesitate to call me at 850-842-1111 or email me at kimr2539@yahoo.com

Thank you!

A handwritten signature in black ink, appearing to read "Kim Rose", with a long horizontal flourish extending to the right.

Kim Rose

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Wildcat Ventures, 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:

Kimberly Rose
Name of Person

Firm/Company

8975 Heron Walk
Address

Miramar Beach FL 32550
City/State and Zip Code

Kimr2539@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kim Rose at (850) 842-1111
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. Wildcat Ventures, 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. Celorado 3. 73-1668047
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 8975 Heron Walk
(Street Address of Principal Office)
Miramar Beach FL
32550

6. 8975 Heron Walk
(Mailing Address)
Miramar Beach FL
32550

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

Name: Kim Rose

Office Address: 8975 Heron Walk
Miramar Beach FL, Florida 32550
(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.

Kimberly Rose
(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:

Manager

Kim Rose
8975 Heron Walk
Miramar Beach FL
32550

(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.

Kimberly Rose
Signature of an authorized person

Typed or printed name of signee

OFFICE OF THE SECRETARY OF STATE
OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

I, Wayne W. Williams, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

WILDCAT VENTURES, LLC

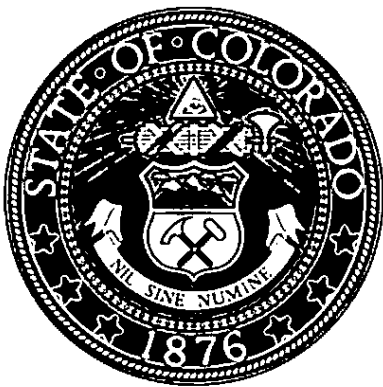
is a

Limited Liability Company

formed or registered on 04/29/2003 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20031137498 .

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 08/06/2018 that have been posted, and by documents delivered to this office electronically through 08/09/2018 @ 04:56:37 .

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 08/09/2018 @ 04:56:37 in accordance with applicable law. This certificate is assigned Confirmation Number 11053293 .



Secretary of State of the State of Colorado

*****End of Certificate*****
Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, <http://www.sos.state.co.us/biz/CertificateSearchCriteria.do> entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, <http://www.sos.state.co.us> click "Businesses, trademarks, trade names" and select "Frequently Asked Questions."