M800008305

(Reg	uestor's Name)	
(req	addict b fighter	
(Add	ress)	
(7.53)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
(Add	ress)	· · · · · · · · · · · · · · · · · · ·
(City)	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	iness Entity Nar	ne)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	
		ļ
W18-7	6213	

Office Use Only



200316640382

Carry Carry Control (1997) Set 16.25

09/24/18--01031--007 **28.75

SEERETARY OF STATE

M. MILLIGAN SEP 1 1 2018



August 22, 2018

MYCONTRACTOR.COM LLC ATTN: STEPHEN PARSLOE 3970 BERLIN DRIVE SARASOTA, FL 34233

SUBJECT: MYCONTRACTOR.COM LLC

Ref. Number: W18000076213

We have received your document for MYCONTRACTOR.COM LLC and your check(s) totaling \$96.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document submitted is to reserve a corporate name for future use in Florida and does not apply to foreign limited liability companies. If your intent is to qualify a foreign limited liability company to transact business in Florida, please complete and return the enclosed application. The fee to file the document is \$125. Therefore, there is a balance due of \$28.75.

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: 918A00017429

Michelle Milligan Senior Section Administrator

COVER LETTER

TQ:	Registration Section Division of Corporati	ons				
SUBJI	My Contractor.C	om LLC				
		Name of	f Limited Liability	Company	_	
The en Exister	closed "Application by F nee, and check are submit	oreign Limited Liability Conted to register the above refe	npany for Authoriz renced foreign lim	vation to Transact Business in Florida nited liability company to transact bus	," Certificate of incss in Florida.	
Please	return all correspondence	e concerning this matter to the	c following:			
	Lisa Parsloe					
			Name of Person		_	
	My Contractor.com LLC					
	Fiπn/Company					
	3970 Berlin Drive					
	Address				-	
	Sarasota, Florida, 34233					
		City/5	State and Zip Code	0	_	
	steveparsloe@	hotmail.com				
	-	E-mail address: (to be use	d for future annua	l report notification)	_	
For furt	ther information concerni	ng this matter, please call:				
	Steve Parsloe		941	4139236		
	Name	of Contact Person	at (Area Code	Daytime Telephone Number	-	
	MAILING ADDRESS Division of Corporation 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		
Enclose #	d is a check for the follow EF\$125.00 Filing Fee 28.75 BALANCE	S130.00 Filing Fee & Certificate of Status	☐ S155.00 Filin Certified Copy		AUG 27	
					MH: 11	

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

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: My Contractor.com LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") eff name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Etability Company," "E.L.C," or "LLC.") (Jurisdiction under the law of which foreign limited hability company is organized) (Date first transacted business in Flonda, if prior to registration.) (See sections 605 0904 & 605,0905, F.S. to determine penalty liability) 99 Wall Street Suite 1961 6. 3970 Berlin Drive (Street Address of Principal Office) (Mailing Address) New York, NY Sarasota, Florida 10005 34233 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Steve Parsloe Name: 3970 Berlin Drive Office Address: Sarasota ______, Florida 34233 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. 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: MAN MAN Lisa Parsloe Stephen Parsloe 3970 Berlin Dri 3970 Berlin DR Sarasota FI.... Sarasota FI. (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, 1 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. Signature of an authorized person LISA PARSLOP

Typed or printed name of signed

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "MYCONTRACTOR COM 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 EIGHTH DAY OF AUGUST, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MYCONTRACTOR.COM LLC" WAS FORMED ON THE TWELFTH DAY OF JULY, A.D. 2018.

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

Section 1

6972568 8300 SR# 20186073332 Authentication: 203211807

Date: 08-08-18