

۰.

۰ ,

(Reque	estor's Name)	
(Addre	55)	
(Addre	55)	
(City/S	tate/Zip/Phone #	¢)
PICK-UP	WAIT	MAIL
(Busine	ess Entity Name	e)
(Docur	nent Number)	
Certified Copies	Certificates o	f Status
		A
Special Instructions to Filir	ng Officer:	0353 DiBi
	.46	mB.
	1V2A	
	Υ.	

÷

Office Use Only



11/07/18--01016--004 **125.00



M. MILLIGAN DEC 1 0 2018



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 29, 2018

WALTER M. WOLF AGENOMORE INTERNATIONAL, LLC 1731 AVENIDA DEL SOL BOCA RATON, FL 33432

SUBJECT: AGENOMORE INTERNATIONAL, LLC Ref. Number: W18000103153

We have received your document for AGENOMORE INTERNATIONAL, 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 (805) 245-6000.

Brenda L Vorisek Director

Letter Number: 518A00024323

COVER LETTER

TO: Registration Section Division of Corporations

AgeNoMore International, LLC.

SUBJECT:

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:

Kenneth B. Morrow, CPA

Name of Person

AgeNoMore International, LLC

Firm/Company

1731 Avenida Del Sol

Address

Boca Raton, FL 33432

City/State and Zip Code

kmorrowcpa@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kenneth B. Morrow, CPA	at	732	241-9747	
Name of Cont		Area Code	Daytime To	elephone Number
MAILING ADDRESS:			STREET ADD	<u>RESS:</u>
Division of Corporations		Division of Corporations		
Registration Section		Registration Section		
P.O. Box 6327		Clifton Building		
Tallahassee, FL 32314		2661 Executive Center Circle Tallahassee, FL 32301		
Enclosed is a check for the following an	nount:			
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified	-	□ \$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 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN-LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1 AgeNoMore International, LLC

name unavailable, enter alternate n	ame adopted for the purpose of transacting business in Flo	rida. The alternate name must in	chude "Limited Liability Comp	any," "L.L.C," or "LLC.")
Wyoming		2		
(Jurisdiction under the law of w	nch foreign limited liability company is organized)	3	(FEI number, if applic	cable)
12/10/2018				
	(Date first transacted business in Florida, if prior to 1See sections 605.0904 & 605.0905, F.S. to determ	registration.) inc penalty liability)		
1731 Avenida Del Sol		1731 Avenida		
(Street Address of F	rincipal Office)	6	(Mailing Address)	
Boca Raton, FL 33432		Boca Raton, F	FL 33432	
_ .				2018
Name and street addres	s of Florida registered agent: (P.O. Box	NOT acceptable)		
Name:	Kenneth B. Morrow, CPA			
Office Address:	1731 Avenida Del Sol			
	Boca Raton	1*1	33432	·
	(City)	, Floric	Iti(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.

(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: <u>Title or Capacity:</u> <u>Name and Address:</u>

President	Kenneth B. Morrow, CPA	
	401 NE Mizner Blvd., Suite 708	
	Boca Raton, FL 33432	
		_
		MIR DEC

(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.

ignature of an authorized person

Kenneth B. Morrow, CPA

Typed of 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,

AgeNoMore International, LLC

is a Limited Liability Company

formed or qualified under the laws of Wyoming did on **October 17**, **2012**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2012-000631203**.

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 3rd day of November, 2018 at 2:46 PM. This certificate is assigned 028539833.



Edward

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.