M1900000976

(Re	questor's Name)	
(,,,		
(Ad	dress)	
·	·	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





100322848941

£1722/17--£1700 - 900 - ₩1250

17 | L.E. D 19 JAN 22 PH 2: 3 5ECHONOG DE SIA

Msellers

COVER LETTER

TO: Registration Section Division of Corporations	9 (***)
•	
SUBJECT: MelissaWasi, LLC	
	mited Liability Company
	ny for Authorization to Transact Business in Florida," Certificate of ced foreign limited liability company to transact business in Florida.
Please return all correspondence concerning this matter to the fo	llowing:
Charles McGrath	
Nan	ne of Person
Firm	n/Company
7079 Highway 35	
•	Address
Mount Hood Parkdale	
City/Stat	e and Zip Code
cmcgrathchiropractic@gmail.com	
E-mail address: (to be used f	or future annual report notification)
For further information concerning this matter, please call:	
Tammy Bishop - Legally Mine	at (800) 375-2453
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	S\$155.00 Filing Fee & S\$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.

name apassibable and a structure	ame adopted for the purpose of transacting husiness in Flori	rde December	and make socked	-1 month take	In Common 11 LC Contl. CT
	ame another the one britishes of matrix rails aristhesis in tark			Contract Lists	inty company. Little, or like t
Alaska	high foreign firming liability company is organizad)	3. <u>83</u> -	2814540	ITA I mumbu	r, (fappik/ahis)
Constitution and the law of w	oci mergo maso morni ponduni a organizar			1177 128142	, ()
	(Date first transacted business in Florida, if prior to r	egistration)			
505 0110.	(See sections 605 (PALL & 605 0905; F.S. in desamin			a.c	
505 Old Steese Hy		6. 707	9 Highway	/ 35 (Mailwig Addre	
Fairbanks, AK 997	·	Mou	int Hood F		OR 97041
					
Name and street address	55 of Florida registered agent: (P.O. Box	NOT accept	uble)		
Name:	Tim Schmedes		- 0	0	
Office Address:	SPAN SUPPLIES STATE OF THE STAT	223	tine	71.	33407
	West Palm Beach		Florida	30-10-	33407
	(Cav)		_ , , , , , , , , , , , , , , , , , , ,	(Zip code	1
esignated in this application comply with the provis	otance: egistered agent and to accept service of pation. I hereby accept the appointment a ions of all statutes relative to the proper is of my position as registored agent.	s registered o	igent and ag	ree to act	in this capacity. I further
aving been named as re esignated in this applica- comply with the provis	egistered agent and to accept service of pation, I hereby accept the appointment at ions of all statutes relative to the proper is of my position as registered agent.	s registered of and complet	igent and ag	ree to act	in this capacity. I further
aving been named as re esignated in this applica- comply with the provis	egistered agent and to accept service of pation. I hereby accept the appointment a ions of all statutes relative to the proper	s registered of and complet	igent and ag	ree to act	in this capacity. I further
aving been named as resignated in this applicate comply with the provising accept the obligation. The name, title or cap	egistered agent and to accept service of pation, I hereby accept the appointment a ions of all statutes relative to the proper is of my position as registored agent. (Registed agent) (Registed agent)	s registered of and complete summers)	e performant	gree to act to nice of my to ge is/arc:	in this capacity. I further luties, and I am familiar w
aving been named as resignated in this applicated in this applicate comply with the provising accept the obligation	egistered agent and to accept service of pation. I hereby accept the appointment at ions of all statutes relative to the proper is of my position as registered agent. (Registered agent a	s registered of and complete summers)	agent and ag	gree to act to nice of my to ge is/arc:	in this capacity. I further
aving been named as resignated in this applicate comply with the provising accept the obligation. The name, title or cap	egistered agent and to accept service of pation, I hereby accept the appointment a ions of all statutes relative to the proper is of my position as registored agent. (Registed agent) (Registed agent)	s registered of and complete summers)	e performant	gree to act to nice of my to ge is/arc:	in this capacity. I further luties, and I am familiar w
aving been named as resignated in this applicate comply with the provising accept the obligation. The name, title or cap Title or Capacity:	egistered agent and to accept service of pation. I hereby accept the appointment actions of all statutes relative to the properties of my position as registered agent. (Registered agent)	s registered of and complete summers)	e performant	gree to act to nice of my to ge is/arc:	in this capacity. I further luties, and I am familiar w
aving been named as resignated in this applicate comply with the provising accept the obligation. The name, title or cap Title or Capacity:	egistered agent and to accept service of pation. I hereby accept the appointment a ions of all statutes relative to the proper is of my position as registored agent. (Registered agent)	s registered of and complete summers)	e performant	gree to act to nice of my to ge is/arc:	in this capacity. I further luties, and I am familiar w
aving been named as resignated in this applicate comply with the provising accept the obligation. The name, title or capacity: Member	egistered agent and to accept service of pation. I hereby accept the appointment allions of all statutes relative to the proper is of my position as registered agent. (Registered agent and address of the person(s) who have and Address: Charles McGrath 7079 Highway 35 Mount mood Pandale OR 9704:	s registered of and complete summers)	e performant	gree to act to nice of my to ge is/arc:	in this capacity. I further luties, and I am familiar w
aving been named as resignated in this applicate comply with the provising accept the obligation. The name, title or cap Title or Capacity:	egistered agent and to accept service of pation, I hereby accept the appointment at ions of all statutes relative to the property of my position as registered agent. (Registered agent)	s registered of and complete summers)	e performant	gree to act to nice of my to ge is/arc:	in this capacity. I further luties, and I am familiar w
aving been named as resignated in this applicate comply with the provising accept the obligation. The name, title or capacity: Member	egistered agent and to accept service of pation. I hereby accept the appointment allions of all statutes relative to the proper is of my position as registered agent. (Registered agent and address of the person(s) who have and Address: Charles McGrath 7079 Highway 35 Mount mood Pandale OR 9704:	s registered of and complete summers)	e performant	gree to act to nice of my to ge is/arc:	in this capacity. I further luties, and I am familiar w
aving been named as resignated in this applicate comply with the provising accept the obligation. The name, title or cap Title or Capacity: Member Member	egistered agent and to accept service of pation. I hereby accept the appointment a ions of all statutes relative to the proper is of my position as registered agent. (Registered agent a reactive and address of the person(s) who have and address. Charles McGrath 7079 Highway 35 Mount Hood Pandale OR 97041 Frank Woodley Jr. 7079 Highway 35 Mount Hood Pandale OR 97041	s registered of and complete summers)	e performant	gree to act to nice of my to ge is/arc:	in this capacity. I further luties, and I am familiar w
aving been named as resignated in this applicate comply with the provising accept the obligation. The name, title or cap Title or Capacity: Member Member	egistered agent and to accept service of pation, I hereby accept the appointment a ions of all statutes relative to the proper is of my position as registored igent. (Registered agent a relative to the proper is of my position as registored igent. (Registered agent a relative to the proper is of my position as registored igent. (Registered agent a relative to the proper is of my position as registored igent. (Registered agent a relative to the proper is of my position as registored in the proper is of my position as re	s registered of and complete and complete suprance) as/have autho Title of	ngent and age performant age performan	gree to act to act to acc of my to	in this capacity. I further futies, and I am familiar w
aving been named as resignated in this applicate comply with the provising accept the obligation. The name, title or cap Title or Capacity: Member Member Use attachments if neces	egistered agent and to accept service of pation, I hereby accept the appointment a ions of all statutes relative to the proper is of my position as registered agent. (Registered agent a relative to the proper is of my position as registered agent.) (Registered agent a relative to the proper is of my position as registered agent.) (Registered agent a relative to the proper is of my position as registered agent.) (Registered agent and address: Charles McGrath 7079 Highway 35 Mount Hood Partidate OR 97041 (Proper is a residue of proper is of existence, no more than 90 days old.)	s registered of and complete and complete suprance) as/have autho Title of	erity to mana	gree to act the nice of my congree to act to	Name and Address:
aving been named as resignated in this applicate comply with the provising accept the obligation. The name, title or capacity: Member Member Attached is a certificaturisdiction under the law	egistered agent and to accept service of pation. I hereby accept the appointment alions of all statutes relative to the proper is of my position as registered agent. (Registered agent and address of the person(s) who have and address of the person(s) who have a service and address: Charles McGrath 7079 Highway 35 Mount Hood Pandale OR 9704: Frank Woodley Jr. 7079 Highway 35 Mount Hood Pandale OR 97041 Tessary: The of existence, no more than 90 days old, wolf which it is organized. (If the certifical	s registered of and complete and complete suprance) as/have autho Title of	erity to mana	gree to act the nice of my congree to act to	Name and Address:
aving been named as resignated in this applicate comply with the provising accept the obligation. The name, title or cap Title or Capacity: Member Member Use attachments if neces	egistered agent and to accept service of pation. I hereby accept the appointment alions of all statutes relative to the proper is of my position as registered agent. (Registered agent and address of the person(s) who have and address of the person(s) who have a service and address: Charles McGrath 7079 Highway 35 Mount Hood Pandale OR 9704: Frank Woodley Jr. 7079 Highway 35 Mount Hood Pandale OR 97041 Tessary: The of existence, no more than 90 days old, wolf which it is organized. (If the certifical	s registered of and complete and complete suprance) as/have autho Title of	erity to mana	gree to act the nice of my congree to act to	Name and Address:
aving been named as resignated in this applicate comply with the provising accept the obligation. The name, title or capacity: Member Member Attached is a certificate urisdiction under the law of the translator must be 0. This document is executive.	egistered agent and to accept service of pation. I hereby accept the appointment alions of all statutes relative to the proper is of my position as registered agent. (Registered agent and address of the person(s) who have and address of the person(s) who have a service and address: Charles McGrath 7079 Highway 35 Mount Hood Pandale OR 9704: Frank Woodley Jr. 7079 Highway 35 Mount Hood Pandale OR 97041 Tessary: The of existence, no more than 90 days old, wolf which it is organized. (If the certifical	ayhave autho Title of	ngent and age performant to mana r Capacity:	ge is/are: c official had a translate.	Name and Address: Name and Address: Inving custody of records in the certificate under
aving been named as resignated in this applicate comply with the provising accept the obligation. The name, title or capacity: Member Member Attached is a certificate urisdiction under the law of the translator must be 0. This document is executive.	egistered agent and to accept service of pation. I hereby accept the appointment alions of all statutes relative to the proper is of my position as registered agent. (Registered agent and address of the person(s) who has a nearly and address of the person(s) who has a nearly and Address: Charles McGrath 7079 Highway 35 Mount Hood Pandale OR 9704: Frank Woodley Jr. 7079 Highway 35 Mount Hood Pandale OR 97041 resary) the of existence, no more than 90 days old, wof which it is organized. (If the certifical submitted) recuted in accordance with section 605.020	ayhave autho Title of	ngent and age performant to mana r Capacity:	ge is/are: c official had a translate.	Name and Address: Name and Address: Inving custody of records in the certificate under

Typed or printed name of arguer

Alaska Entity #10095813

State of Alaska Department of Commerce, Community, and Economic Development Corporations, Business, and Professional Licensing

Certificate of Compliance

The undersigned, as Commissioner of Commerce, Community, and Economic Development of the State of Alaska, and custodian of corporation records for said state, hereby issues a Certificate of Compliance for:

MelissaWasi, LLC

This entity was formed on December 07, 2018 and is in good standing. This entity has filed all biennial reports and fees due at this time.

No information is available in this office on the financial condition, business activity or practices of this corporation.



IN TESTIMONY WHEREOF, I execute the certificate and affix the Great Seal of the State of Alaska effective **December 13, 2018**.

Julie Anderson Commissioner

Julie Center