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COVER LETTER

то:	Registration Section				
	Division of	f Corporation	ş		

Happier Place, LLC

SUBJECT: _

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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:			2813	•.		
Luci Westphal					• 1	۱۱. م
	Na	me of Person			 	ريار ا
Happier Place, 1.L	2				5)	Ĵ
	Fi	m/Company			ت: س	
245 Bel Forest Dri	ve			1	, în	
_ 		Address				
Belleair Bluffs, FL	33770					
······································	City/St	ate and Zip Code				
hello@happier.place						
<u>-</u> E	mail address: (to be used	for future annual	report noti	fication)		
For further information concerning th	is matter, please call:					
Luci Westphal		347 at (495-319	95		
Name of Co	ontact Person	Area Code	Dayt	ime Telephone Number	_	
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division e Registratio Clifton Bi 2661 Exec	ADDRESS: of Corporations on Section ailding cutive Center Circle ce, FL 32301		
	amount: \$130.00 Filing Fee & ertificate of Status	□ \$155.00 Filin Certified Copy	g Fee &	□ \$160,00 Filing Fee, of Status & Certified C		

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

IN COMPLIANCE WITH SECTION 605.002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN-LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

L. Happier Place, LLC

f name unavailable, enter alternate n	ame adopted for the purpose of transacting business in Flo	rida. The a	lternate name must include "Limited Liability Co	ompany," "I	" L_C," or "L	LÇ.")	
5 State of Colorado		3.	821592341				
(Jurisdiction under the law of which foreign limited liability company is organized)			(FEI number, it applicable)				
January 1, 2019							
·	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determ			-			
245 Bel Forest Drive		6.	PO Box 466				
(Street Address of)	Principal Office)		(Mailing Address)	÷.		-	
Belleair Bluffs, FL 337	770		Indian Rocks Beach, FL 33785	•	-		
(doindo addi	rss: 2720 Sonta Guit		, <u>, , , , , , , , , , , , , , , ,</u>	-	1.1	_	
(<u></u>	<u>ess: 2720 Spoke Gurt</u> Ft. Gillins, CO 80521)				-	
Name and street addres	s of Florida registered agent: (P.O. Box	NOT	(cceptable)				
Name:	Luci Westphal					١	
	245 Bel Forest Drive				. }		
Office Address:					7.1 (1		
	Belleair Bluffs		, Florida <u>33770</u>		• 1		
	(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.

(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:
Owner	Luci Westphal 245 Bel Forest Belleair Bluffs / FZ_33770		
	- <u>-</u>		

(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.

Signature of an authorized person

Luci Westphał

Typed or printed name of signee

OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

I, Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

Happier Place, LLC

ís a

Limited Liability Company

formed or registered on 05/12/2017 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 20171364704

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 02/06/2019 that have been posted, and by documents delivered to this office electronically through 02/07/2019 @ 11:26:20

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 02/07/2019 @ 11:26:20 in accordance with applicable law. This certificate is assigned Confirmation Number 11377966



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Secretary of State of the State of Colorado

End of Certificate <u>Soticy: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective</u>. 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.uvobi2/CertificateSearchCriteria.do entering the certificate confirmation number displayed on the certificate, and following the instructions displayed. <u>Confirming the issuance of a certificate is mereby</u> <u>optional</u> 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.uv/click "Businesses, trademarks, trade names" and select "Frequently Asked Questions."