

M19000005449

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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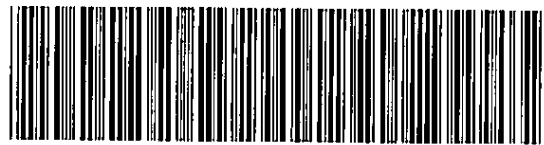
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06/03/19--01041--009 **125.00

05/23/19--01012--007 **638.75

2019 JUN -3 PM 4: 37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

JUN 04 2019

M. SOLOMON



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 23, 2019

LAURA F. VINCENT
14646 196TH AVE. SE
RENTON, WA 98059

SUBJECT: U-GO GIRL WORK TOOLS LLC
Ref. Number: W19000037966

2019, MAY -3 PM 3:23

We have received your document for U-GO GIRL WORK TOOLS LLC .
However, the enclosed document has not been filed and is being returned to you
for the following reason(s):

Apologies for the oversight, but our office could not locate the application fee of
\$125.00. Please submit the application fee of \$125.00 at your earliest
convenience.

If you have any questions concerning the filing of your document, please call
(850) 245-6052.

Mel Solomon
Regulatory Specialist II Supervisor

Letter Number: 219A00010507

COVER LETTER

MAILED

4/11/19

TO: Registration Section
Division of Corporations

SUBJECT: U-GOGIRL WORK TOOLS 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:

LAURA F. VINCENT
Name of Person

U-GOGIRLWORKTOOLS LLS
Firm/Company

14646 196th AVE. SE
Address

RENTON, WA 98059
City/State and Zip Code

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

For further information concerning this matter, please call:

LAURA F VINCENT at (425) 442-9268
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. 11-GIRL WORK TOOLS 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. WASHINGTON 3. 603 568 967
(Jurisdiction under the law of which foreign limited liability company is organized) (FBI number, if applicable)

4. 4/2018
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 14646 196TH AVE SE 6. same
(Street Address of Principal Office) (Mailing Address)
Benton, WA 98059

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

Name: BON TODD
Office Address: 4334 Carriage Lane
Destin, Florida 32541
(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.

X [Signature]
(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:

LAURA F. VINCENT 14646 196TH AVE SE OWNER
BENTON, WA 98059 OWNER

(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.

Laura F Vincent
Signature of an authorized person

LAURA F. VINCENT
Typed or printed name of signer

2019 JUN -3 PM 4:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

UNITED STATES OF AMERICA

The State of Washington



Secretary of State

I, KIM WYMAN, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF EXISTENCE

OF

U-GOGIRL WORK TOOLS LLC

I CERTIFY that the records on file in this office show that the above named entity was formed under the laws of the State of Washington and that its public organic record was filed in Washington and became effective on 12/14/2015.

I FURTHER CERTIFY that the entity's duration is Perpetual, and that as of the date of this certificate, the records of the Secretary of State do not reflect that this entity has been dissolved.

I FURTHER CERTIFY that all fees, interest, and penalties owed and collected through the Secretary of State have been paid.

I FURTHER CERTIFY that the most recent annual report has been delivered to the Secretary of State for filing and that proceedings for administrative dissolution are not pending.

Issued Date: 04/11/2019
UBI Number: 603 568 967



Given under my hand and the Seal of the State
of Washington at Olympia, the State Capital

Kim Wyman, Secretary of State

Date Issued: 04/11/2019