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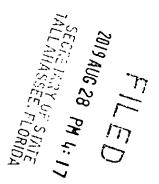
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Y SCOTT AUG 2 9 2019





August 17, 2019

D. BARTON LEEK 1500 BEVILLE RD. STE:606 #311 DAYTONA BEACH, FL 32114

SUBJECT: AFFORDABLETOURS.COM, LLC

Ref. Number: W19000076546

We have received your document for AFFORDABLETOURS.COM, 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):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Yvette Scott Document Specialist II

Letter Number: 119A00017016

RECEIVED
AUG 2.9 2019

COVER LETTER

то:		ation Section Lof Corporation	s					
SUBJE		FORDABLETO	JRS.COM, LLC				_	
		Name of Limited Liability Company						
			eign Limited Liability Comp d to register the above refere					
Please r	eturn all c	correspondence c	oncerning this matter to the	following:				
		D. Barton Leek				2018 7AL) •	
			Na	ime of Person		Chie	T	
		The License Co	mpany LLC			IAS:	FILED	
	D. Barton Leek Name of Person The License Company LLC Firm/Company 1500 Beville Rd. Ste. 606 #311							
		1500 Beville Ro	d. Ste. 606 #311			STALE FLORIDA		
	Address				10 A			
		Daytona Beach, FL 32114						
			City/St	ate and Zip Code			=	
	i	info@thelicensec	ompany.com					
	_		E-mail address: (to be used	for future annual	report not	ification)	•	
For furt	her intorn	nation concerning	g this matter, please call:					
	D. Barto	on Leek		844 at (484-24(_)	66	_	
		Name o	f Contact Person	Area Code	Day	time 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					
Enclose		ck for the follow ,00 Filing Fee	ing amount: ☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filin Certified Copy	g Fee &	☐ \$160.00 Filing Fee. Cof Status & Certified Co		

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. AFFORDABLETOUR (Name of Foreign	S.COM, LLC Limited Liability Company; must include "Lir	mited Liability Company," "L.L.C.," or "L	LC.")		
(If name unavailable, enter alternate t	name adopted for the purpose of transacting business in	a Florida. The alternate name must include "Limit	ted Liability Company," "L.L.C," or "LLC")		
2. Texas		3. 36-2739571			
(Jurisdiction under the law of w	hich foreign limited liability company is organized)		I number, if applicable)		
1					
4. <u></u>	(Date first transacted business in Florida, if pric (See sections 605,0904 & 605,0905, F.S. to det	or to registration) termine penalty liability)			
5 11150 CASH RD STA			0 CASH RD STAFFORD, TX 77477		
(Street Address of			ng Address)		
					
			= 5		
			28		
7. Name and street addre	ss of Florida registered agent: (P.O. E	Box NOT acceptable)	C1		
	Northwest Registered Agent LLC		PH 4:		
Name:	Trominest Registered rigem about		S. F.		
Office Address:	7901 4th St N STE 300				
	St. Petersburg	. Florida <u>33702</u>	P -		
	(City)		Zip code)		
	(Registered age	ent's signature)			
8. The name, title or cap	acity and address of the person(s) who	o has/have authority to manage is/	are:		
Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:		
PRESIDENT	JAIME FERNANDEZ JR	VICE PRESIDENT	RODRIGO FERNANDEZ		
<u></u>	11150 CASH RD		11150 CASH RD		
	STAFFORD, TX.77477		STAFFORD, TX 77477		
(Use attachments if neces	ssary)				
	e of existence, no more than 90 days of which it is organized. (If the certiful submitted)				
	cuted in accordance with section 605 (to the Department of State constitutes)				
	14 1	1/			
	Sign	sture of an authorized person			
	RODRIGO FERNANDEZ				
		ped or printed name of signee			

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Office of the Secretary of State

Certificate of Fact

The undersigned, as Deputy Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for AffordableTours.com, LLC (file number 802593097), a Domestic Limited Liability Company (LLC), was filed in this office on November 29, 2016.

It is further certified that the entity status in Texas is in existence.

2019 AUG 28 PM 4: 17

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on June 05, 2019.



Phone: (512) 463-5555

Prepared by: SOS-WEB

Jose A. Esparza Deputy Secretary of State