

N19000011820

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

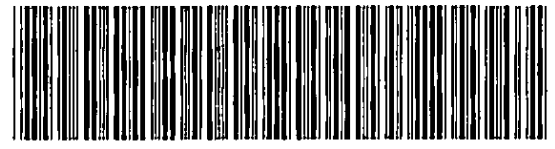
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

855
00/47
W19000097749

Office Use Only



800335475168

10/25/13--01008--025 **130.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



erbragesent by Lee Rivers from Floria Division of
Corporations. He advised that you have the original application
on file. We never received the rejection notice.

SHAWN KESSLER
3870 E. FLAMINGO RD.
SUITE: A2 PMB:577
LAS VEGAS, NV 89121

3RD Submission

SUBJECT: LANDMARK DEVELOPMENT GROUP,
LLC

Ref. Number: W19000097749

is there anyway
to expedite this
3rd attempt?

We have received your document for LANDMARK DEVELOPMENT
GROUP, LLC and your check(s) totaling \$130.00. 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.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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: 219A00022877

7018 2290 0002 0642 6416

We never received the rejection
Lee Rivers in your office sent this
in an email and advised that we
print & attach to filing

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LANDMARK DEVELOPMENT GROUP, 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:

Shawn Kessler

Name of Person

LANDMARK DEVELOPMENT GROUP, LLC

Firm/Company

3870 E. Flamingo Rd Suite A2 PMB 5027

Address

Las Vegas, NV 89121

City/State and Zip Code

kessininvest7@gmail.com

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

For further information concerning this matter, please call:

Shawn Kessler

Name of Contact Person

at (702) 982-2800

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:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$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

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TALLAHASSEE, FLORIDA

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. LANDMARK DEVELOPMENT GROUP, LLC
(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "LLC," or "LLP")

If alternate name available, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "LLP."

2. Wyoming
(Jurisdiction under the law of which foreign limited liability company is organized)

3. _____
(FEI number, if applicable)

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

5. 30 N Gould St Ste R
(Street Address of Principal Office)

6. 4730 S Fort Apache Rd Ste 300
(Mailing Address)

Sheridan, WY 82801

Las Vegas, NV 89117

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

Name: Registered Agents Inc.

Office Address: 7901 4th St N STE 300

St. Petersburg, Florida 33702
(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.

Bill Hume

(Registered agent's signature)

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ALLAHADSE, FL 0000A

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity: **Name and Address:**

☒ Manager Name: Shawn Kessler

☐ Member Address: 4730 S Fort Apache Rd Ste 300

☐ Authorized Las Vegas, NV 89147

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

Title or Capacity: **Name and Address:**

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

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SECRETARY OF STATE

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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.

Shawn Kessler

Signature of an authorized person

Shawn Kessler

Typed or printed name of signer

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,

LANDMARK DEVELOPMENT GROUP, LLC


is a
Limited Liability Company

formed or qualified under the laws of Wyoming did on **September 20, 2019**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2019-000876912**.

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 26th day of September, 2019 at 11:51 AM. This certificate is assigned 03261119




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.