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(Requestor's Name)
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PICK-UP WAIT MAIL
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(Document Number)
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COVER LETTER

TO:		ration Section n of Corporations		
SUBJI		EHAVIOR MATTERS, LLC		
	-			
			Company for Authorization to Transact Business in Florida eferenced foreign limited liability company to transact bus	
Please	return all	correspondence concerning this matter to	the following:	
		JARRETT EDGE		
			Name of Person	-
		BEHAVIOR MATTERS, LLC		
			Firm/Company	_
		13007 WOODFORD STREET		
			Address	-
		ORLANDO, FL 32832		
		Ci	ity/State and Zip Code	-
		JARRETT.E.EDGE@GMAIL.COM		
		E-mail address: (to be	used for future annual report notification)	-
For fur	rther infor	mation concerning this matter, please cal	l:	
JARREIT EDGE		ETT EDGE	253 686-5781	
		Name of Contact Person	at ()	2020 ::
Mailing Address:		Address:	Street Address:	Ξ:
Registration Section			Registration Section	
Division of Corporations		•	Division of Corporations	ငာ
	P.O. Box 6327 Tallahassee. FL 32314		The Centre of Tallahassee	P
			2415 N. Monroe Street, Suite 810	ά
			Tallahassee, FL 32303	~>
	Englace	ed is a check for the following amount:		Ç
		make check payable to: FLORIDA DEP.	ARTMENT OF STATE	
		5.00 Filing Fee		. Certificate
		Certificate o		

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: BEHAVIOR MATTERS, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") acting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "L.L.C.") STATE OF ALASKA 27-3253974 (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 16941 N. EAGLE RIVER LOOP RD 13007 WOODFORD STREET (Street Address of Principal Office) EAGLE RIVER, AK 99577 ORLANDO, FL 32832 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) JARRETT EDGE Name: 13007 WOODFORD STREET Office Address: **ORLANDO** 32832 . Florida (City) 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.

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:	Title or Capacity	<u>y:</u>	Name and Address:
□Manager	REBEKA EDGE Name:	□Manager	Name:	
■Member	13007 WOODFORD ST. Address:	□Member	Address:	
□Authorized	ORLANDO, FL 32832	□Authorized		
Person	<u> </u>	Person		· · · · · · · · · · · · · · · · · · ·
□Other	Other	□Other		□Other
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized		□Authorized		
Person		Person		
□Other	□Other	□Other		□Other
□Manager	Name:	□Manager	Name:	2020 +
□Member	Address:	□Member	Address:	
□Authorized		□Authorized		
Person		Person		
Other	Other	□Other	··	☐Other

<u>Important Notice</u>: 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.

RUV		
	Signature of an authorized person	
REBEKA P EDGE		
	Typed or printed name of signee	





May 7, 2020

JARRETT EDGE 13007 WOODFORD ST ORLANDO, FL 32832 US

SUBJECT: BEHAVIOR MATTERS LLC

Ref. Number: W20000045554

We have received your document for BEHAVIOR MATTERS 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.

Sharon D Franklin Regulatory Specialist II

Letter Number: 020A00009439

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