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P.O. BOX 555518 Address

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

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Mail out	☐ Will wait	Photocopy	Certificate of Statu

NEW FILINGS
Profit
NonProfit
Limited Liability
Domestication
Other

14.40	AMENDMENTS
<u> </u>	Amendment
	Resignation of R.A., Officer/Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

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OTHER FILINGS
Annual Report
Fictitious Name
Name Reservation

REGISTRATION/ - QUALIFICATION 4
Foreign
 Limited Partnership
Reinstatement
Trademark
Other

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Enternrises, LLC (Name of foreign limited liability company must end with the words "limited company" or their abbreviation "L.C." if not so contained in the name at present.) State of Delaware 3. 59-3508219
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 5. 30 years + 2028
(Duration: Year limited liability company will cease to exist or "perpetual") Upon Qualification.

(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.) P.O. Box 555518; Orlando, FL 32855 8. List name, title, and business address of each managing member[MGRM] or manager[MGR]who will manage the foreign limited liability company in Florida: (attach additional page if necessary) NAME & ADDRESS: NAME & ADDRESS: TITLE: Gwendolyn P. Bryant MGRM 620 Hattaway Drive

^{9.} Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the Secretary of State or the proper official having custody of records in the state under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:	
Nu Resolv Enterprises, LLC	
2. The name and the Florida street address of the registered agent and office are:	
Gwendolyn P. Bruant (Name)	
Florida street address (P.O. Box NOT ACCEPTABLE)	SECRETAL DIVISION OF 98 MAY -
Alfamonte SpringsFL 32701-6105 City/State/Zip	T AM 9: 46

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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Filing Fee: \$ 35 for Designation of Registered Agent

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

The undersigned member or authorized representative of a member of		
Nu Resolv Enterprises, LLC certifies:		
1) the above named limited liability company has at least two members;		
2) the total amount of cash contributed by the member(s) is	s 32	<u> </u>
2) the total amount of cash contributed by the member(s) is	<u>ہے ہے</u>	<u> </u>
3) if any, the agreed value of property other than cash contributed by member(s) is (A description of the property is attached and made a part hereto.) and	\$ 400	00;
4) the total amount of cash and property contributed and anticipated to be contributed by member(s) is (This total includes amounts from 2 and 3 above.)	\$15,00	00,
Durendden P. Brigans		
Signature of a member or an authorized representative of a mem (In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)	ber.	
Gwendolyn P. Bryant Typed or printed name of signee	98 MAY - 7 AM	SECRET DIVISION
Typed or printed name of signee	-7	
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Filing Fee: \$250.00 for Application and Affidavit