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SECTION AND ASSES, FLORIDA

C. LEWIS

APR 1 9 2012

EXAMINER

#### **COVER LETTER**

Registration Section Division of Corporations

TO:

	Name of Limited Liability Company
	Liability Company for Authorization to Transact Business in Florida," Certificate he above referenced foreign limited liability company to transact business in Flori
lease return all correspondence concerning thi	s matter to the following:
Gregory E. Robinson	
	Name of Person
Gregory E. Robinson,	
	Firm/Company
1422 Elbridge Payne	, Suite 170
	Address
Chesterfield, MO 630	17
	City/State and Zip Code
jcorrea2@earthlink	.net
E-mail addre	ss: (to be used for future annual report notification)
or further information concerning this matter,	please call:
Gregory E. Robinson	at (636 ) 532-9500
Name of Person	Area Code & Daytime Telephone Number
MAILING ADDRESS: Division of Corporations	STREET ADDRESS: Division of Corporations
Registration Section	Registration Section
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
nclosed is a check for the following an	nount:
\$125.00 Filing Fee \$130.00 Filin Certificate of	g Fee & \$\int\\$155.00 \text{ Filing Fee & \$\int\\$160.00 \text{ Filing Fee, Certificate}

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

ACCE TO A SECOND OF THE STATE OF PLONIDA:
1. 1835 Retcon LLC  (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(Name of Foreign Limited Liability Company; must include Limited Liability Company, L.L.C., of LLC.)
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the writ consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability
Company," "L.L.C," "LLC.")
2. Missouri 3. 45-5070806
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)
company is organized)
4. April 13, 2012 5. Perpetual
(Date of Organization) (Duration: Year limited liability company will cease to
exist or "perpetual")
5. <u> </u>
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7 16334 Peppermill Drive
7. 10334 Feppermin Drive
Wildwood, MO 63005
(Street Address of Principal Office)
8. If limited liability company is a manager-managed company, check here
9. The name and usual business addresses of the managing members or managers are as follows:
Jaime Correa and Alisa A. Correa
16334 Peppermill Drive
10354 Feppermin Drive
Wildwood, MO 63005
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records
he jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a ranslation of the certificate under oath of the translator must be submitted.)
·
1. Nature of business or purposes to be conducted or promoted in Florida: Holding title to real
estate and all other legal acts permitted limited liability companies
0.11
WYUM -
Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the

Gregory E. Robinson

Typed or printed name of signee

penalties of perjury that the facts stated herein are true. 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.)

## 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:	
1835 Retcon LLC	
If unavailable, the alternate to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office are:	
C T Corporation System (Name)	12 APR
1200 South Pine Island Road	18 PM
Florida Street Address (P.O. Box NOT ACCEPTABLE)  Plantation 33324	1: 05 STATE LORIDA
City/State/Zip	

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 as provided for in Chapter 608, Florida Statutes.

C T Corporation System

By: Cotherin authority (Signature)

Katherine Lackey, Asst. Secy.

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

# STATE OF MISSOURI



Robin Carnahan Secretary of State

# CORPORATION DIVISION CERTIFICATE OF GOOD STANDING

I, ROBIN CARNAHAN, Secretary of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

#### 1835 RETCON LLC LC1220404

was created under the laws of this State on the 13th day of April, 2012, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 17th day of April, 2012

n (Amakan

Secretary of State

