

M17000002084

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

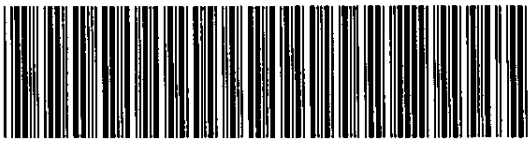
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:  
  
608      534  
  
~~2980~~      W17-11487

Office Use Only



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02/07/17--01017--020 \*\*155.00

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
17 FEB - 7 PM 12: 00

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
17 FEB - 7 PM 2: 15

MAR 13 2017  
S. YOUNG



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 23, 2017

JULIA GRRENBERG-AGUILAR  
MYUSACORPORATION.COM  
1 RADISSON PLAZA STE 800  
NEW ROCHELLE, NY 10801

SUBJECT: SUPERIOR KARTZ, LLC  
Ref. Number: W17000011487

FILED  
2017 MAR -7 PM 3:05  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

We have received your document for SUPERIOR KARTZ, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please accept our apology for failing to mention this in our previous letter.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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.

Shelia H Young  
Regulatory Specialist II

Letter Number: 417A00002587

FILED  
17 FEB -7 PM 2:15  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 8, 2017

JULIA GRRENBERG-AGUILAR  
MYUSACORPORATION.COM  
1 RADISSON PLAZA STE 800  
NEW ROCHELLE, NY 10801

SUBJECT: SUPERIOR KARTZ, LLC  
Ref. Number: W17000011487

We have received your document for SUPERIOR KARTZ, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

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.

Shelia H Young  
Regulatory Specialist II

Letter Number: 417A00002587

2017 FEB 22 PM 2:44  
TALLAHASSEE, FLORIDA

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
17 FEB -7 PM 12:00

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: SUPERIOR KARTZ, 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:

Julia Greenberg- Aguilar  
Name of Person  
  
MYUSACORPORATION.COM  
Firm/Company  
  
1 Radisson Plaza, Suite 800  
Address  
  
New Rochelle, NY 10801  
City/State and Zip Code  
  
julia@myusacorporation.com  
E-mail address: (to be used for future annual report notification)

RECEIVED  
STATE OF FLORIDA  
TALLAHASSEE  
17 FEB -7 PM 2:15

For further information concerning this matter, please call:

Julia Greenberg-Aguilar at ( 877 ) 330-2677  
Name of Contact Person 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:

- \$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

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. SUPERIOR KARTZ, LLC
(Name of Foreign Limited Liability Company: must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. IN 3. (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

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

5. 967 fourth ave North Maples, FL 34102 (Street Address of Principal Office)

6. 967 fourth ave North Maples, FL, 34102 (Mailing Address)

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

Name: Incorp Services, Inc
Office Address: 17888 67th Court North Loxahatchee, Florida 33470 (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.

(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Kevin Roethemeier- Member
2802 E 400 N
Whiteland, IN, 46184

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)

(Signature of an authorized person)

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.

Kevin Roethemeier
Typed or printed name of signee

17 FEB -7 PM 2: 15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**State of Indiana**  
**Office of the Secretary of State**

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

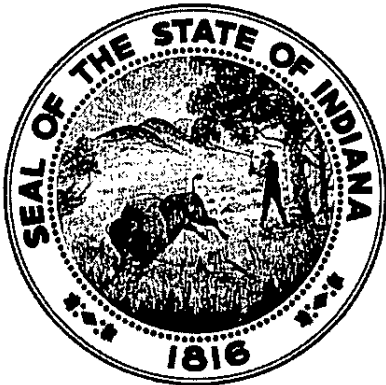
I, CONNIE LAWSON, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

**SUPERIOR KARTZ, LLC**

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on October 14, 2016, and was in existence or authorized to transact business in the State of Indiana on January 06, 2017.

I further certify this Domestic Limited Liability Company has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution, or expiration has been filed or taken place.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, January 06, 2017

*Connie Lawson*

CONNIE LAWSON  
SECRETARY OF STATE

201610141162747 / 2017187507

Verify this certificate: <https://bsd.sos.in.gov/ValidateCertificate>

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
17 FEB -7 PM 2:15