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PICK-UP WAIT MAIL
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(Document Number)
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Special Instructions to Filing Officer:
cert W17-20430
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SECRETARY OF STATE

S Warren APR 2 4 2017



March 10, 2017

WARREN A REBARKER P.O. BOX 1071 DUNN, NC 28335-1071

SUBJECT: ACB LEASING, LLC Ref. Number: W17000020430

We have received your document for ACB LEASING, LLC and your check(s) totaling \$160.00. 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.

ANNUAL REPORT DOES NOT MEET STATUTORY REQUIREMENTS, NEED GOOD STANDING CERTIFICATE.

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.

Stacey M Warren Regulatory Specialist II

www.sunbiz.org

Letter Number: 317A00004684

COVER LETTER

TO:

TO: Registration Section Division of Corporations
SUBJECT: ACB Leasing, 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:
Warren A. ReBarker Name of Person
ACB Leasing, LLC Firm/Company
Firm/Company
P.O. Box 1071 Address
Address
Dunn NC 28335-1071 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Warren A. Re Backer at (919) 395-3358 Name of Contact Person Area Code Daytime Telephone Number
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301
Enclosed is a check for the following amount: \$\Begin{array}{cccccccccccccccccccccccccccccccccccc

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: ACB Leasing LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") Not applicable
(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.") State of North Carolina
(Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 7618 Green path Road Ouro NC 28334 (Street Address of Principal Office) P.O. Bux 1071 Dynn, NC 28335-1071
(Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Wilson Realty LLC 16913 Gulf Blud Name: Office Address: 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 complywith 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. Sunglo & Wulson Registered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Warren A. ReBarker, Manager, ACB Leasing, LLC 614 Canon Gate Drive Cary, NC 27518-2980 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.

Typed or printed name of signee



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

ACB LEASING, LLC

is a limited liability company duly formed under the laws of the State of North Carolina, having been formed on the 11th day of March, 2016, with its period of duration being Perpetual.

I FURTHER certify that the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act; and that the said limited liability company has not filed articles of dissolution as of this date of this certificate.





Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Ralcigh, this 14th day of April, 2017.

Elaine I. Marshall

Secretary of State