Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : LICENSES ETC INC

Account Number : 120070000159 Phone : (239) 777-1028

Fax Number : (977)275-3593

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

ETC@LICENSESETC.COM

Foreign Limited Liability Company ONLY THE BEST BUILDER LLC

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Certificate of Status	1 .
Certified Copy	1
Page Count	05
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S. WARREN OCT 1 9 2017

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COVER LETTER

TO:	Registration Section Division of Corporation	ns			
SUBJE	Only The Best Build				
		Name of I	Limited Liability Co	mpany	
The ene Existen	closed "Application by Foree, and check are submitted	reign Limited Liability Comp ed to register the above refere	enced for Authorizati	on to Tra d liability	nsact Business in Florida," Certificate of company to transact business in Florida.
Please	return all correspondence	concerning this matter to the	following:		
	Lisa Adams				
		N:	nme of Person		
	Licenses, Etc.,	Inc.			_
		Fi	rm/Company		
	886 110th Ave	. N., Suite #6			
			Address		
	Naples, FL 34	108			
		City/S	tate and Zip Code		
	support@license		· • • • • • • • • • • • • • • • • • • •		
r: c	al	E-mail address: (to be use	d for filture annual i	report not	incation)
I.Or HIL	ther information concernir	ig this matter, prease can.	1;2		
	Lisa Adams		at (777-83: 	
	Name	of Contact Person	Area Code	Day	time Telephone Number
	MAILING ADDRESS: Division of Corporation Registration Section P.O. Box 6327 failabassee, FL 32314			Division Registrati Clitton B 2661 Lxc	ADDRESS: of Corporations ion Section uilding rentive Center Circle ice, FL 32301
Enclos	ed is a check for the follow S125.00 Filing Fee	ving amount: \$\Boxed{\subset} \text{S130.00 Filing Fee & Certificate of Status}	S155,00 Filing Certified Copy	g Fee &	■ \$160,00 Filing Fee, Certificate of Status & Certified Copy

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

OMPANYTOTRANSICTBU - ONE VICER RESET RE	H DEP LIC		
(Name of Foreign	Limited Liability Company; must include "Lin	mited Liability Company," "L.IC.," or "I.I.C.")	
•	• • •		
name was aduble, enter alternate na	ame adopted for the purpose of transacting business in	n Florida. The alternate marte most is clude "Limited Cid	bility Company," "L.L.C," to "LLC.")
NEW JERSEY		3. 27-1287229	
plansdiction ander the law of wh	high foreign filmled liability company is organized)	(FEI ឈ្មោះ)	ber, if applicable)
	(Date first transacted histories in Florids, if pro (See sections 605,0904 & 505,0905, P.S. to de-	or in registration.) Hermine penaky liability)	
683 GRAVELLY HOI	LLOW ROAD	6. 683 GRAVELLY HOLLO	W ROAD
(Street Address of Shooped Office)		(Maring Add	ives)
MEDFORD, NJ 08055		MEDFORD, NJ 08055	<u></u>
			- : : : : : : : : : : : : : : : : : : :
			罗. 🕇 🖺
Name and street address	ss of Florida registered agent: (P.O. f	Box NOT acceptable)	SSE 8
Name:	LICENSES, ETC., INC.		
	886 110TH AVE. N., SUITE #6	_	E100
Office Address:	880 110111 11 11 12 13 13 13 13 13 13 13 13 13 13 13 13 13		92 5
	NAPLES		<u> </u>
aving been named as re esignated in this applical comply with the provisi	gistered agent and to accept service tion, I hereby accept the appointmen	of process for the above stated limited nt as registered agent and agree to act oper and complete performance of my	l liability company at the plac in this capacity. I further ag
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Typed or anated name of signice

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STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANEING

ONLY THE BEST BUILDER LLC 0600350580

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on October 16, 2009.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey. Annual Reports are outstanding for the following year(s): 2015-2016

I further certify that the registered agent and office are:

ONLY THE BEST BUILDER LLC 683 GRAVELLY HOLLOW RD MEDFORD, NJ 08055



IN TESSMONY WHEREOF, I have hereunte set my hand and affixed my Official Seal at Trenton, this 18th day of October, 2017

Ford M. Scudder Acting State Treasurer

Certificate Number: 6083349167

Versty this certificate online at

https://www.t.state.nj.us/TYTR_StandingCert/JSP/Serifs_Cert/jsp