

M19000001452

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

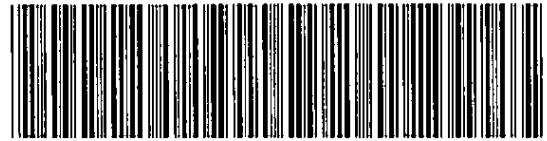
(Document Number)

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W19000009107

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FILED

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FEB 11 2019



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 29, 2019

GREG BROWN
801 IOWA AVE W.
MARSHALLTOWN, IA 50158

SUBJECT: ACE PRECISION INTERNATIONAL, LLC
Ref. Number: W19000009107

We have received your document for ACE PRECISION INTERNATIONAL, 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):

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.

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.

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) 245-6052.

Cathy Cave

Letter Number: 919A00002053

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ACE PRECISION INTERNATIONAL, L.L.C.

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:

LAURA R. WENCK

Name of Person

BELIN MCCORMICK, P.C.

Firm/Company

666 WALNUT STREET, SUITE 2000

Address

DES MOINES, IA 50309

City/State and Zip Code

LWENCK@BELINMCCORMICK.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LAURA R WENCK

Name of Contact Person

515

Area Code

283-4662

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:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

\$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

The Florida Department of State is holding previously sent check in the amount of \$160.00

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

IN COMPLIANCE WITH SECTION 605.002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. ACE PRECISION INTERNATIONAL, L.L.C.
(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. IOWA 3. 26-0886310
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 01/07/2019
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 801 IOWA AVE W. 6. PO BOX 693
(Street Address of Principal Office) (Mailing Address)

MARSHALLTOWN, IA 50158 MARSHALLTOWN, IA 50158

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

Name: COGENCY GLOBAL, INC.

Office Address: 115 N CALHOUN ST, STE. 4

TALLAHASSEE . Florida 32301
(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.

Kim Peters Assistant Secretary
(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity: **Name and Address:**

Manager Name: GREG BROWN

Member Address: 801 IOWA AVE W.

Authorized MARSHALLTOWN, IA 50158

Person _____

Other CEO Other _____

Title or Capacity: **Name and Address:**

Manager Name: CHRIS TERRY

Member Address: 801 IOWA AVE W.

Authorized MARSHALLTOWN, IA 50158

Person _____

Other PRESIDENT Other _____

Manager Name: _____

Member Address: _____

Authorized _____

Person _____

Other _____ Other _____

Manager Name: _____

Member Address: _____

Authorized _____

Person _____

Other _____ Other _____

Manager Name: _____

Member Address: _____

Authorized _____

Person _____

Other _____ Other _____

Manager Name: _____

Member Address: _____

Authorized _____

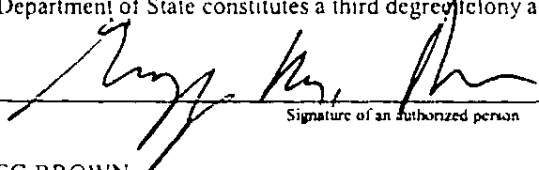
Person _____

Other _____ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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)

10. 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.

 1-7-19
 Signature of an authorized person
 GREG BROWN

 Typed or printed name of signee

2/7/2019

Certificate of Standing

**IOWA SECRETARY OF STATE
PAUL D. PATE**



CERTIFICATE OF EXISTENCE

Date: 2/7/2019

Name: ACE PRECISION INTERNATIONAL, L.L.C. (489DLC - 351174)

Date of Incorporation: 9/5/2007

Duration: PERPETUAL

I, Paul D. Pate, Secretary of State of the State of Iowa, custodian of the records of incorporations, certify the following for the limited liability company named on this certificate:

- a. The entity is in existence and duly incorporated under the laws of Iowa.
- b. All fees, taxes and penalties required under the Revised Uniform Limited Liability Company Act and other laws due the Secretary of State have been paid.
- c. The most recent biennial report required has been filed with the Secretary of State.
- d. The Secretary of State has not administratively dissolved the limited liability company.
- e. The Secretary of State has not filed either a statement of dissolution or statement of termination.

Certificate ID: CS163870

To validate certificates visit:
sos.iowa.gov/ValidateCertificate

A handwritten signature in black ink that reads "Paul D. Pate". The signature is stylized with a large, looped "P" and "P" at the end.

Paul D. Pate, Iowa Secretary of State