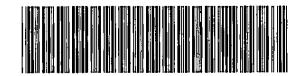
# M2300019518

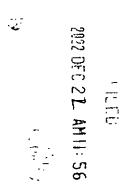
(Re	questor's Name)	<del></del>
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(Cil	ty/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
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(Ďo	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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DEC 5.5 S055

## COVER LETTER

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TO:

Registration Section

Division of Corporations	
SUBJECT: MRD Freight Name of	Solutions LLC Limited Liability Company
The enclosed "Application by Foreign Limited Liability Com Existence, and check are submitted to register the above refer	pany for Authorization to Transact Business in Florida," Certificate of enced foreign limited liability company to transact business in Florida.
Please return all correspondence concerning this matter to the	following:
Michael R	Daniels ame of Person
Fi	rm/Company
2415 Woody	Trace Ln Address
Tampa, FL 3	53612 tate and Zip Code
daniels michael E-mail address: (to be used	831@yahoo.com I for future annual report notification)
For further information concerning this matter, please call:	
Name of Contact Person	at ( <u>478</u> ) <u>800-8548</u> Area Code Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPART  \$125.00 Filing Fee \$\Bigci \text{S130.00 Filing Fee & Certificate of State}\$	S155.00 Filing Fee & S160.00 Filing Fee, Certificate





December 20, 2022

MICHAEL R DANIERLS 2415 WOODY TRACE LN TAMPA, FL 33612

SUBJECT: MRD FREIGHT SOLUTIONS LLC

Ref. Number: W22000156649

We have received your document for MRD FREIGHT SOLUTIONS LLC and your check(s) totaling \$125.00. 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.

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.

Letter Number: 622A00028445

Tracy L Lemieux Regulatory Specialist II

www.sunbiz.org

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

e unavailable, enter alternate name adopted for the purpose of transacting husiness in F	LLC lorida. The alternate name	e must include "Limited Liability Co	mpany,""El C," oi
Colorado isdection under the law of which to engo lumied fability company is organized)	3	(Fl;l number, if apple	icable)
(Date tirst transacted business in Florida, if prior to (See sections 605 0804 & 605 0905, F.S. to determ	registration (	<del></del>	
OI E. Kennedy Blvd.	6	ing Address)	
uite 802			
ampa, FL 33602		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	20
e and <u>street address</u> of Florida registered agent; (P.O. Box		 I	2022 DEC 21 AH II: 56
Name: VANYIV		11 CM	± ::
Office Address: 2415 Woody Tra	u Ln	7	6.
		lorida <u>33612</u> (Zip code)	6
Office Address: 2415 Woody Tra	rocess for the aboregistered agent	orida <u>להל להל ל</u> (Zip code) ove stated limited liability and agree to act in this ca	company at ti apacity. I fur.

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:	Title or Capacity	Name and Address:
<b>X</b> Manager	Name: Michael Daniels	∐Manager	Name:
□Member	Address: 2415 Woody Trace Ln	□Member	Address:
□Authorized	Tampa, FL 33612	□Authorized	
Person	·	Person	
□Other	Other	□Other	□Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
□Other	Other	□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
□Other	□Other	□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 outh 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.

Ax Michael Danes	
Tarest or Orinted James of Johnson	_

# OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

### CERTIFICATE OF FACT OF GOOD STANDING

I, Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

MRD Freight Solutions LLC

#### is a

#### Limited Liability Company

formed or registered on 12/28/2015 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20151830605.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 10/10/2022 that have been posted, and by documents delivered to this office electronically through 10/11/2022 @ 12:57:17.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 10/11/2022 @ 12:57:17 in accordance with applicable law. This certificate is assigned Confirmation Number 14379198



Secretary of State of the State of Colorado

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, http://www.sos.state.co.us/biz/CertificateSearchCriteria do entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, http://www.sos.state.co.us/click/Businesses, trademarks, trade names and select "Frequently Asked Questions."