B14000000169

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Strategic Dealer Services, LP
Name of Foreign Limited Partnership or Limited Liability Limited Partnership

The enclosed application, certificate of status and fees are submitted to register a foreign limited partnership or limited liability limited partnership to transact business in Florida.
Please return all correspondence concerning this matter to:

Dave Hardin
Contact Person

Dave N Hardin CPA
Firm/Company

PO Box 5508
Address

Granbury, TX 76049
City, State and Zip Code

dnhardin@windstream.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Anita Hardin at (817) 910-2010
Name of Contact Person — Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☐ $1,000.00 Filing Fees ($965 Filing Fee and $35 Registered Agent Fee)

☐ $1,008.75 Filing Fees and Certificate of Status

☐ $1,052.50 Filing Fees and Certified Copy

☒ $1,061.25 Filing Fee, Certified Copy, and Certificate of Status

STREET ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP TO TRANSACT BUSINESS IN FLORIDA

1. Strategic Dealer Services, LP

(Name of Limited Partnership or Limited Liability Limited Partnership, *which must include suffix*)

Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.

Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.

If name unavailable, name under which the limited partnership or limited liability limited partnership proposes to register to transact business in Florida; must contain acceptable suffix.

2. Texas
State or Country of Formation

3. 09/02/2010
Date of Formation

4. **Federal Employer Identification Number:** 27-3391883

5. **Name of Registered Agent for Service of Process and Florida Street Address:**

CT Corporation System

1200 South Pine Rd

Plantation, FL 33324

6. *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.*

Signature of Registered Agent Michael E. Jones Assistant Secretary

7. **Principal Office:**

5605 N. MacArthur Blvd

Suite 560

Irving, TX 75038

8. **Mailing Address:**

5605 N. MacArthur Blvd

Suite 560

Irving, TX 75038

14 JUL 16 PM 3:35

9. **If limited partnership is a limited liability limited partnership,** check box .

10. **Name, principal office address, and mailing address of each general partner:**

Name of General Partner: Langeco, LLC

Street Address: 5508 North Gate Rd
Granbury, TX 76049

Mailing Address: PO Box 5508
Granbury, TX 76049

Name of General Partner:

Street Address:

Mailing Address:

Name of General Partner:

Street Address:

Mailing Address:

Name of General Partner:

Street Address:

Mailing Address:

Name of General Partner:

Street Address:

Mailing Address:

Name of General Partner:_____ Name of General Partner:_____

Street Address: _____ Street Address: _____

_____ _____

Mailing Address:_____ Mailing Address:_____

_____ _____

11. **Effective date, if other than the date of filing:**_____.
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to the delivery of this application to the Florida Department of State, by the Secretary of State or other official having custody of the entity's records in the jurisdiction under the law of which it is organized.

Signed this 14 day of July ,20 14

_____
Signature of a general partner

The individual signing this document affirm that the facts stated herein are true and the individual is aware that 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.

Filing Fees:	**$1,000.00** ($965 Filing Fee and $35 Registered Agent Fee)
Certified Copy (optional):	**$52.50**
Certificate of Status (optional):	**$8.75**

14 JUL 15 PM 3:39

Corporations Section
P.O.Box 13697
Austin, Texas 78711-3697

Nandita Berry
Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Strategic Dealer Services, LP (file number 801313970), a Domestic Limited Partnership (LP), was filed in this office on September 02, 2010.

It is further certified that the entity status in Texas is in existence.

It is further certified that our records indicate DAVE N. HARDIN as the designated registered agent for the above named entity and the designated registered office for said entity is as follows:

5508 N. GATE RD.

GRANBURY, TX - 76049 USA

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on June 30, 2014.

14 JUL 16 PM 3:3

Nandita Berry

Nandita Berry
Secretary of State