

MO3000001032

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

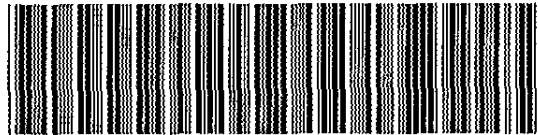
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FILED
03 MAR 31 AM 8:54
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Lone Wolf Specialized LLC

P. O. Box 560466
Orlando, FL 32856
407-375-4858

March 24, 2003

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

3/31
FOR LC

To Whom It May Concern:

Please find enclosed, Delaware certificate of good standing, Authorization to transact business in FL and Certificate of designation of registered agent forms for your consideration. Also enclosed is a check for \$125.00 for application fees.

My request for these was taken on 03-06-2003 by **alunt** in your office.

Please mail correspondence to,

Martin Lawrence
P. O. Box 560466
Orlando, FL 32856

Yours truly,

Martin Lawrence

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. LONE WOLF SPECIALIZED LLC
(Name of foreign limited liability company)

2. DELAWARE 3. N/A
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 3-4-03 5. PERPETUAL
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")

6. 3-24-03
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))

7. 350 E. JACKSON ST. #1112
ORLANDO FL. 32801
(Street address of principal office)

8. If limited liability company is a manager-managed company, check here ☐

9. The name and usual business addresses of the managing members or managers are as follows:

MARTIN LAWRENCE 350 E. JACKSON ST. #1112 ORLANDO FL 32801
RITA P. CROW 350 E. JACKSON ST. #1112 ORLANDO FL 32801

10. Attached is an original 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. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: TRUCKING

Martin Lawrence
Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

MARTIN LAWRENCE
Typed or printed name of signee

FILED
03 MAR 31 AM 8:54
SECRETARY OF STATE
TALLAHASSEE FLORIDA

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

LONE WOLF SPECIALIZED LLC

2. The name and the Florida street address of the registered agent and office are:

LONE WOLF MARTIN LAWRENCE
(Name)

350 E. JACKSON ST. #1112

Florida street address (P.O. Box **NOT** ACCEPTABLE)

ORLANDO

FL

City/State/Zip

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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..


(Signature)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

Delaware

PAGE 1

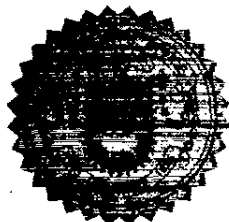
The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LONE WOLF SPECIALIZED LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIFTH DAY OF MARCH, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LONE WOLF SPECIALIZED LLC" WAS FORMED ON THE FOURTH DAY OF MARCH, A.D. 2003.



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

3631686 8300

AUTHENTICATION: 2289107

030144690

DATE: 03-05-03