

1704000000444

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300027548173

01/27/04--01035--012 \*\*130.00

FILED  
2004 JAN 27 PM 12:01  
CLERK OF SUPERIOR COURT  
TALLAHASSEE, FLORIDA

J. BRYAN FEB - 4 2004

**PATTERSON, ESKIN  
& BALL**

**ATTORNEYS AND COUNSELORS AT LAW**

NEAL C. PATTERSON, JR., P.A.  
HAROLD S. ESKIN, P.A.\*

DIXIE LEE BALL, P.A.

\*Certified Family Law Mediator

\*Certified Civil Law Mediator

January 14, 2004

REGISTRATION SECTION  
DIVISION OF CORPORATIONS  
P. O. BOX 6327  
TALLAHASSEE, FL. 32314

RE: Flowone Lean Consulting, LLC

Dear Sir:

Enclosed is an Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida and the Designation of Registered Agent. A check for \$130.00 is enclosed.

Please return Certificate of Status to Registered Agent.

Sincerely,



Janice S. Meredith  
Secretary to DIXIE LEE BALL

enclosures

DLB/jm

cc: Aneesh Suneja

FILED  
2004 JAN 27 PM 12:01  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**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:*

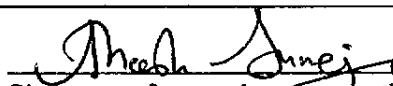
1. FLOWONE LEAN CONSULTING, LLC  
(Name of foreign limited liability company)
2. DELAWARE 3. 20-0298420  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. JULY 8, 2003 5. PERPETUAL  
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6. UPON QUALIFICATION  
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 5431 AGUALINDA BOULEVARD  
CAPE CORAL, FL. 33914  
(Street address of principal office)

8. If limited liability company is a manager-managed company, check here ☒ **XX**
9. The name and usual business addresses of the managing members or managers are as follows:

ANEESH SUNEJA  
5431 AGUALINDA BOULEVARD  
CAPE CORAL, FLORIDA 33914

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: \_\_\_\_\_

BUSINESS PROCESS CONSULTING

  
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.)  
ANEESH SUNEJA  
Typed or printed name of signee

FILED  
2004 JAN 27 PM 12:01  
DIVISION OF CORPORATIONS  
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:

FLOWONE LEAN CONSULTING, LLC

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

ANEESH SUNEJA

(Name)

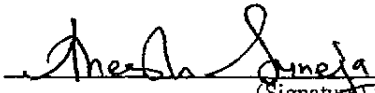
5431 AGUALINDA BOULEVARD

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

CAPE CORAL, FL 33914

(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)

FILED  
2004 JAN 27 PM 12:01  
JULY 10 1977 CORPORATION'S  
TALLAHASSEE, FLORIDA

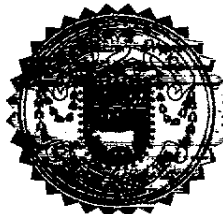
# Delaware

*The First State*

PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FLOWONE LEAN CONSULTING, 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 DECEMBER, A.D. 2003.

FILED  
2004 JAN 27 PM 12:01  
CLERK OF SUPERIOR COURT  
TALLAHASSEE, FLORIDA



*Harriet Smith Windsor*

Harriet Smith Windsor, Secretary of State