

Division of Corporations

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Florida Department of State  
Division of Corporations  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## To:

Division of Corporations  
Fax Number : (850)205-0383

## From:

Account Name : ROETZEL & ANDRESS  
Account Number : I20000000121  
Phone : (239)649-6200  
Fax Number : (239)261-3659

## FOREIGN LIMITED LIABILITY COMPANY

True Investment, LLC

Certificate of Status	1
Certified Copy	1
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** TRUE INVESTMENT, LLC

(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:

JOSEPH A. TROIANO, ESQ.

(Name of Person)

ROETZEL & ANDRESS, LPA

(Firm/Company)

2320 FIRST STREET, SUITE 1000

(Address)

FORT MYERS, FL 33901

(City/State and Zip Code)

For further information concerning this matter, please call:

JOSEPH A. TROIANO, ESQ.

(Name of Person)

at ( 239 ) 337-3850

(Area Code & Daytime Telephone Number)

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**

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

Enclosed is a check for the following amount:

☒ \$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

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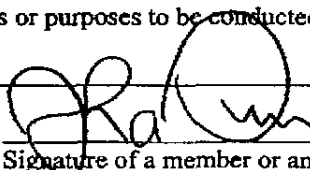
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TALLAHASSEE, FLORIDA

**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. TRUE INVESTMENT, LLC  
(Name of Foreign Limited Liability Company)
2. ALASKA  
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 20-1552942  
(FEI number, if applicable)
4. AUGUST 2, 2004  
(Date of Organization)
5. 2114  
(Duration: Year limited liability company will cease to exist or "perpetual")
6. SEPTEMBER 15, 2004  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 2320 FIRST STREET, SUITE 1000  
FORT MYERS, FL 33901  
(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:  
JOSEPH A. TROIANO, MANAGER  
2320 FIRST STREET, SUITE 1000  
FORT MYERS, FL 33901
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: REPAIR SERVICES

  
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.)  
JOSEPH A. TROIANO, ESQ., AUTHORIZED REPRESENTATIVE

Typed or printed name of signee

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**CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE** SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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:

TRUE INVESTMENT, LLC

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

JOSEPH A. TROIANO, ESQ.

(Name)

2320 FIRST STREET, SUITE 1000

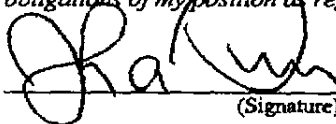
Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

FORT MYERS

FL 33901

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, Florida Statutes.*

  
(Signature)

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

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Alaska Entity #: 87995-D

**State of Alaska**  
**Department of Community and Economic Development**  
**Division of Banking, Securities and Corporations**

**CERTIFICATE**  
**OF**  
**ORGANIZATION**  
**Limited Liability Company**

The undersigned, as Commissioner of Community and Economic Development of the State of Alaska, hereby certifies that Articles of Organization of

**TRUE INVESTMENT, LLC**

have been received in this office and have been found to conform to law.

ACCORDINGLY, the undersigned, as Commissioner of Community and Economic Development, and by virtue of the authority vested in me by law, hereby issues this Certificate of Organization and attaches hereto the original copy of the Articles of Organization.

IN TESTIMONY WHEREOF, I execute this certificate and  
affix the Great Seal of the State of Alaska on  
**AUGUST 2, 2004.**

*Edgar Blatchford*

Edgar Blatchford  
Commissioner

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