M05000002239

(Rec	questor's Name)	
Ų.i.s.	quotier o riums,	
(Add	dress)	
(Add	dress)	
(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nan	ne)
(Doc	cument Number)	
(Doc	ament Namber)	
Certified Copies	Certificates	of Status
		. –
Special Instructions to F		
·	•	

Office Use Only



200051506752

04/26/05--01021--003 **125.00

FILED

05 APR 26 PM 1: 08

SECRELABLE STATE
SECRELABLE FLORIDA

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	·
SUBJECT: CHS LEASING, LLC	
(N	ame of Limited Liability Company)
	Limited Liability Company for Authorization to Transact Business in check are submitted to register the above referenced foreign limited in Florida.
Please return all correspondence concer	rning this matter to the following:
	LOUIS M. MEINERS, JR.
	(Name of Person)
	ADVOCATE CONSULTING
	(Firm/Company)
9229	DELEGATES ROW, SUITE 245
	(Address)
IN	IDIANAPOLIS, IN 46240
	(City/State and Zip Code)
For further information concerning this	matter, please call:
YOLANDA ROBINSON	at (317) 581-4077
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
409 E. Gaines Street	P.O. Box 6327
Tallahassee, Florida 32399	Tallahassee, Florida 32314
Enclosed is a check for the following ar	nount:
	Filing Fee & Status Sta

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

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

1.	CHS LEASING, LLC		
	(Name of Foreign Li	mite	ed Liability Company)
2.	DELAWARE	3.	20-2702011_
~-	(Jurisdiction under the law of which foreign limited liability company is organized)		(FEI number, if applicable)
4	APRIL 15, 2005	5.	PERPETUAL
••	(Date of Organization)		(Duration: Year limited liability company will cease to exist or "perpetual")
6.	APRIL 20, 2005		
	(Date first transacted business (See sections 608.501 & 608.50	s in F 02 F.S	Florida, if prior to registration.) S. to determine penalty liability)
7	2199 NW 30TH ROAD		
••			ALL APPLICATION OF THE PROPERTY OF THE PROPERT
	BOCA RATON, FL 33431-6367 (Street Address	of P	
8.	If limited liability company is a manager-managed		npany, check here
9.	The name and usual business address of the managi	ng n	members or managers are as follows:
	_		
	PAUL E. SHAPIRO	CAR	ROLYN G. SHAPIRO
	2199 NW 30TH ROAD	219	99 NW 30TH ROAD
	BOCA RATON, FL 33431-6367	вос	CA RATON, FL 33431-6367
av f t	Attached is an original certificate of existence, no ring custody of records in the jurisdiction under the law he certificate is in a foreign language, a translation mitted.)	v of	which it is organized. (A photocopy is not acceptable
1.	Nature of business or purposes to be conducted or p	orom	noted in Florida:
	EQUIPMENT LEASING		<u> </u>
	Signature of a member of an auth (In accordance with section 608.408(3), F.S. an affirmation under the penalties of perjury	oriz, the e	execution of this document constitutes the facts stated herein are true.)
	LOUIS M. M Typed or printed		
	Typed of printed	n ngi	ane of Signee

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:						
CHS LEASING, LLC						
2. The name and the Florida street address of the registered agent and office are:						
LOUIS M. MEINERS, JR. (Name)						
2640 GOLDEN GATE PKWY, #205 Florida Street Address (P.O. Box NOT ACCEPTABLE)						
NAPLES FL 34105 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.

Louis M. Muners, Jr.
(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

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CHS LEASING, 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 TWENTY-FIRST DAY OF APRIL, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CHS LEASING, LLC" WAS FORMED ON THE FIFTEENTH DAY OF APRIL, A.D. 2005.

Darriet Smith Hindson Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 3827010

DATE: 04-21-05

3956000 8300

050320278