

M05 000003105

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H05000142912 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 678-5926

FOREIGN LIMITED LIABILITY COMPANY

Mariposa Ltd., Co.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing

Public Access Help

6/9
Crest

FILED
05 JUN -8 PM 3:52
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
05 JUN -8 AM 10:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06/08/2005 15:35 8508785926
06/08/2005 15:20 9544760158
06/08/05 11:00 FAX 7278216819

CT CORPORATION SYSTM
CT CORPORATION
SOCKOL & ASSOC.

PAGE 02/04
PAGE 02/03
003/006

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

**IN COMPLIANCE WITH SECTION 608.05, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN
LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:**

1. MARIPOSA LTD., Co.
(Name of Foreign Limited Liability Company)
2. Ohio
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 34-1831377
(FBI number, if applicable)
4. July 3, 2000
(Date of Organization)
5. Perpetual
(Duration: Year limited liability company will cease to exist or "perpetual")
6. Upon registration
(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 4180 LaPlante, Mondova, Ohio 43542
(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:
Scott Lenz, President - 4180 LaPlante, Mondova, Ohio 43542
David Swank, Vice President - 4180 LaPlante, Mondova, Ohio 43542

10. Attached is an original certificate of existence, not 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: Independent Insurance
adjusting and any other lawful business for which a limited liability company can be organized in this state

Jennifer Parsons
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.)

Jennifer Parsons, for Sockol & Associates, P.A.
Typed or printed name of signee Attorney's for David Swank, V.P.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 JUN -8 AM 10:07

FILED

06/08/2005 15:35 8508785926

CT CORPORATION SYSTM

PAGE 03/04

05/08/2005 15:28 9544760158
06/08/05 11:00 FAX 7278215319

CT CORPORATION
800KOL & ASSOC.

PAGE 03/03
004/008

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:

Macross LTD. Co.

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

CT Corporation System

(Name)

1200 South Pine Island Road

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

Plantation

FL

33324

City/State/Zip

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 JUN - 8 AM 10: 07

FILED

Having been named as registered agent and to accept service of process for the above stated limited liability company of 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.

PETER F. SOUZA

REGISTERED AGENT

(Signature)

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

06/08/2005 15:35 8508785926
06/08/2005 13:52 9544760158
06/08/05 11:01 FAX 7278216319

CT CORPORATION SYSTM
CT CORPORATION
SOCKOL & ASSOC.

PAGE 04/04
PAGE 04/04
005/008

**United States of America
State of Ohio
Office of the Secretary of State**

I, J. Kenneth Blackwell, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign corporations; that said records show MARIPOSA LTD., an Ohio Limited Liability Company, Registration Number 1171398, was organized within the State of Ohio on July 03, 2000, is currently in FULL FORCE AND EFFECT upon the records of this office.



*Witness my hand and the seal of the
Secretary of State at Columbus, Ohio
this 2nd day of June, A.D. 2005*

J. Kenneth Blackwell

Ohio Secretary of State

Validation Number: V2005153J646EF