# M05000003998

(R	equestor's Name)
(A	ddress)
(A	ddress)
(^	ddress)
(C	ity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(B	usiness Entity Name)
(D	ocument Number)
1	1
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
7/15	FORLC

Office Use Only



700056101117

38714705--01022--007 \*\*160.00

M. HODGES

W55-30383

### TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
Sivision of Corporations	
SUBJECT: RPM Completexpo Services, LLC	
(Name of Lin	nited Liability Company)
	iability Company for Authorization to Transact Business in submitted to register the above referenced foreign limited
Please return all correspondence concerning this r	natter to the following:
Jeannie Leggett	
(Na	ame of Person)
Jeannie Leggett, CPA	
	irm/Company)
18 Old Mountain Drive	(Address)
Powder Springs, GA 30127	
	tate and Zip Code)
For further information concerning this matter, ple	ease call:
Jeannie Legget	at ( 770 ) 794-4474
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET ADDRESS: Registration Section	MAILING ADDRESS: 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 amount:	

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee & ☐ \$155.00 Filing Fee & ☑ \$160.00 Filing Fee, Certificate

Certificate of Status Certified Copy of Status & Certified Copy



#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

June 21, 2005

JEANNIE LEGGETT 18 OLD MOUNTAIN DRIVE POWDER SPRINGS, GA 30127

SUBJECT: RPM COMPLETEXPO SERVICES, LLC

Ref. Number: W05000030383

We have received your document for RPM COMPLETEXPO SERVICES, LLC and your check(s) totaling \$160.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Letter Number: 005A00042429

Tammi Cline Document Specialist

Division of Cornerations - P.O. ROY 6327 - Tallahassee, Florida 32314

## 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:

	RPM Completexpo Services, LLC (Name of Foreign Limited L	iability Company)	
	·	• • • • • • • • • • • • • • • • • • • •	
		20-2223340	
	(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)	
	May 12, 2005	Perpetual	
	(Date of Organization)	(Duration: Year limited liability company will cea exist or "perpetual")	se to
	N/A		
	(Date first transacted business in Flo (See sections 608.501 & 608.502 F.S.	rida, if prior to registration.) to determine penalty liability)	_
•	1395 S Marietta Parkway Bldg 400, Ste 210		
	Marietta, Georgia 30067		
	(Street Address of	of Principal Office)	S
. If limited liability company is a manager-managed company, check here			
	The name and usual business addresses of the mana	ging members or managers are as follows:	. ,
	J. Bryan Doles, III 6044 Jessica Drive Apopka, FL 3270	03	• }
			<u>.</u> ,
		<del></del>	<u></u>
e	Attached is an original certificate of existence, no more than 90 di jurisdiction under the law of which it is organized. (A photocopy islation of the certificate under eath of the translator must be subm	is not acceptable. If the certificate is in a foreign langua	
1	. Nature of business or purposes to be conducted or	promoted in Florida: Rental of equipment for	
	trade shows		
	Then Kind		
		horized representative of a member.  S., the execution of this document constitutes	

Typed or printed name 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:						
RPM Complet	expo Services, LLC					
2. The name	The name and the Florida street address of the registered agent and office are:					
	J. Bryan Doles, III					
		(Name)				
	499 N SR 434, Suite 2039					
	Florida Street Address (P.O. Box NOT ACCEPTABLE)					
	Altamonte Springs,	FL 32714				
	<del></del>	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)

Secretary of State
Corporations Division
315 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CONTROL NUMBER : 0536548
DATE INC/AUTH/FILED: 05/24/2005
JURISDICTION : GEORGIA
PRINT DATE : 07/15/2005
FORM NUMBER : 211

JEANNIE LEGGETT 18 OLD MOUNTAIN DRIVE POWDER SPRINGS, GA 30127

#### CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that as of the above print date

## A GEORGIA LIMITED LIABILITY COMPANY

is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated.

Said entity was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date and has not filed articles of dissolution, certificate of cancellation or any other similar document with the Office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the print date above. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This information is electronically transmitted, issued and certified in accordance with the Georgia Electronic Records and Signatures Act and Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

20050715134722338



Cathy Cox Secretary of State