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### Porter-Walker LLC

2203 Oakland Parkway P.O. Box 519 Columbia, TN 38402-0519 Phone 931-388-1861 Fax 931-380-1669

TO:	Registration Section Division of Corporations	
	<b>a</b> .	

SUBJECT: Porter-WAlker 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:

Douglas C. Venable (Name of Person)	·
(Name of Person)	
Porter-WAlker, LLC	
(Firm/Company)	
2203 OAKIAND PANKWAY (Address)	
(Address)	
Columbia, TD 38401	
(City/State and Zip Code)	
aformation concerning this matter, please call:	

For further in

Kathy Witherow	at (931 ) 388-1861	
(Name of Person)	(Area Code & Daytime Telephone Number	
MAILING ADDRESS:	STREET ADDRESS:	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Enclosed is a check for the	following amount:		
☐\$125.00 Filing Fee	130.00 Filing Fee &	□\$155.00 Filing Fee &	□\$160.00 Filing Fce, Certificate
	Certificate of S	tatus Certified Copy	of Status & Certified Copy

# 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. Porter- WAIKer, LLC (Name of Foreign Limited Liability Company)	<del></del>	The state of the s
2. Tennessee  (Name of Foreign Limited Liability Company)  2. Tennessee  (Jurisdiction under the law of which foreign limited liability company is organized)  (FEI number, if applicable)	<del></del>	•
4. April 16, 2001  (Date of Organization)  5. Perpetual  (Duration: Year limited liability company will converted to the converted of the conv	ease to	• v#.
6.  (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)  7. 3812 Gardenia Ave.  Orlando, FL 32809 (Street Address of Principal Office)	07 JAN 22	SECRETARY DIVISION OF SC
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:  Douglas C. Venable C/D Purter-Walker LLC	PH 2: 21	ED OF STATE PEROPATIONS
PO 30X 5 19  Columbia TN 38402 - 0519  10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custo the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign langu		ords in
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: Wholesale dis	tribu	
of Industrial & Safety supplies and medical & healthcare so  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.)  DOUGLAS C. VENABLE  Typed or printed name of signee	pp)ie	<i>Š</i>

## 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:
Porter-Walker, LLC
2. The name and the Florida street address of the registered agent and office are:
C T Corporation System
(Name)
1200 South Pine Island Road
Florida Street Address (P.O. Box NOT ACCEPTABLE)
Plantation, Florida 33324
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 register 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.
Bu: War I R A A A A A

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

(Signature)
MARY R. ADAMS
ASSISTANT SECRETARY

Secretary of State
Division of Business Services
312 Eighth Avenue North
6th Floor, William R. Snodgrass Tower
Nashville, Tennessee 37243

ISSUANCE DATE: 01/09/2007 REQUEST NUMBER: 07009521 TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 04/16/2001 STATUS: ACTIVE CORPORATE EXPIRATION DATE: PERPETUAL

CONTROL NUMBER: 0406702 JURISDICTION: TENNESSEE

TO: DOUGLAS C VENABLE 2203 OAKLAND PKWY

COLUMBIA, TN 38401

REQUESTED BY: DOUGLAS C VENABLE 2203 OAKLAND PKWY

COLUMBIA, TN 38401

#### CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT

A LIMITED LIABILITY COMPANY DULY FORMED UNDER THE LAW OF THIS STATE WITH DATE OF FORMATION AND DURATION AS GIVEN ABOVE; THAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE EXISTENCE OF THE LIMITED LIABILITY COMPANY HAVE BEEN PAID: THAT THE MOST RECENT LIMITED LIABILITY ANNUAL REPORT REQUIRED HAS BEEN FILED; THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND THAT ARTICLES OF TERMINATION OF THE EXISTENCE HAVE NOT BEEN FILED.

FOR: REQUEST FOR CERTIFICATE

PORTER-WALKER, LLC.

COLUMBIA, TN 38401-0000

P. O. BOX 519

ON DATE: 01/09/07

FEES

RECEIVED:

\$20.00 \$0.00

TOTAL PAYMENT RECEIVED:

\$20.08

RECEIPT NUMBER: 00004066453 ACCOUNT NUMBER: 00038957

AGRICULTURE TO AGRICU

FROM:

RILEY C. DARNELL SECRETARY OF STATE

55-4452