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07/25/08--01039--001 **160.00

D. BRUCE JUL 28 2008 **EXAMINER**

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: Root Systems,	LLC
(Name of Limited	Liability Company)
The enclosed "Application by Foreign Limited Liabilit Florida," Certificate of Existence, and check are submiliability company to transact business in Florida	
Please return all correspondence concerning this matte	r to the following:
Joseph B. (Name)	Syace of Person)
Root Systems,	LLC
(Firm	Company)
3300 5.0 Cear	
(Ad	dress) ZE 08
Palm Beach	F1. 33480 AAA 25 25 Tond Zip Code)
For further information concerning this matter, please	
	u(561) 670-3139 A
(Name of Person)	(Area Code & Daytime Telephone Number)
Division of Corporations P.O. Box 6327 Cl Tallahassee, FL 32314 26	ivision of Corporations of Corporations iffon Building to Executive Center Circle allahassee, FL 32301
Enclosed is a check for the following amount: \$\sum_\$125.00 \text{Filing Fee} \sum_\$\$130.00 \text{Filing Fee} & \sum_\$ Certificate of State	\$155.00 Filing Fee & \$160.00 Filing Fee, Certificate 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 HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")
2. Nashville, Tennessee 3. # 26-24-28-520 (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. 1/09/2008 (Date of Organization) 5. Ver Detual (Duration: Year limited liability company will cease to exist or "perpetual")
6
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 7. 3300 5. Ocean Blvd 2015 Palm Beach Fl. 33480
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 Crace
3500 5. Ocean Blva #3015
Palm Beach F1. 33480
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: 50165 of.
Cleaning Products
mi
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.)

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:			
Root Systems, LLC			
If name unavailable, the alternate name to be used in the state of Florida is:			
2. The name and the Florida street address of the registered agent and office are:	SECRET.	08 JUL 25	
Joseph B. Crace	-1388 0 XXX		
3300 5. Ocean Blva #2015	FLOF	AH II: 23	
3300 5. Ocean blvd = 5015 Florida Street Address (P.O. Box NOT ACCEPTABLE)	TF. AOA	23	
Palm Beach FL F1. 33480	_		
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 **Levision of Business Services** 312 Eighth Avenue North 6th Floor, William R. Snodgrass Tower Nashville, Tennessee 37243

ISSUANCE DATE: 07/15/2008 REQUEST NUMBER: 08197515 TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 01/09/2008 STATUS: ACTIVE CORPORATE EXPIRATION DATE: PERPETUAL CONTROL NUMBER: 0567354 JURISDICTION: TENNESSEE

TO: JOSEPH B CRACE/D S TEVEN PARKER 3300 S OCEAN BLVD **APT 201S** PALM BEACH, FL 33480

REQUESTED BY: JOSEPH B CRACE/D S TEVEN PARKER 3300 S OCEAN BLVD **APT 201S** PALM BEACH, FL 33480

CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT "ROOT SYSTEMS, LLC"

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 ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND
THAT ARTICLES OF TERMINATION OF THE EXISTENCE HAVE NOT BEEN FILED.

FOR: REQUEST FOR CERTIFICATE

PALM BEACH, FL 33480-0000

ON DATE: 07/15/08

RECEIVED:

FEES \$20.00

\$D.0D

TOTAL PAYMENT RECEIVED:

\$20.00

RECEIPT NUMBER: 00004452205 ACCOUNT NUMBER: 00607388



FROM:

JOSEPH B CRACE 3300 S OCEAN BLVD APT 201S

RILEY C. DARNELL SECRETARY OF STATE