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#### **COVER LETTER**

TO:

	Registration Section Division of Corporations					
SUBJEC		me of Limited Liability Compa	iny			
	sed "Application by Foreign Limited Lial, and check are submitted to register the a					
Please ret	urn all correspondence concerning this ma	atter to the following:				
	Pamela Bush	Name of Person				
	Tubz Plus, LLC	Firm/Company				
	P.O. Box 5920	Address		·····		
	Thomasville, GA 31757	City/State and Zip Code		SEER	2011 JUN 15	**************************************
For furthe	pam@tubzplus.com E-mail address: ( r information concerning this matter, plea	to be used for future annual repuse call:	oort notification)	ENARY:OFS		
Ē	Pamela Bush Name of Person	at (229  Area Code & Daytime Te	226-6388	ORIDA	PH 12: 05	Sant
T R P	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Callahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	e			
	l is a check for the following amou 125.00 Filing Fee \$\square\S\f\\$130.00 Filing Fe Certificate of Star	int: cc & <b>□\$</b> 155.00 Filing Fee &	\$160.00 Filing Fee, of Status & Certifie		<del>)</del>	

## 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. Tubz Plus, LLC  (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	<del></del>
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Li Company," "L.L.C," "LLC.")	
2. Georgia  (Jurisdiction under the law of which foreign limited liability company is organized)  3. 20-2231655  (FEI number, if applicable)	<u> </u>
4. 1/27/05  (Date of Organization)  5. perpetual  (Duration: Year limited liability company will cease exist or "perpetual")	to
6	
7. 340 Beulah Church Rd	<u></u>
Thomasville, GA 31757 (Street Address of Principal Office)	_ 19
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:	3
Thomasville, 6A 31757  Bret Bush	_
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, 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:	
Repair, refinish and resurface bath tubs and ceramic tile  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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)	<u></u> .
Pamela Bush	

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.

Tubz Plus, LLC		
If unavailable, the alternate to be used in the state of Florida is:		
2. The name and the Florida street address of the registered agent and office are:  Pawela Bush (Name)  H2HO-B Brewster Rd.  Florida Street Address (P.O. Box NOT ACCEPTABLE)  Tallahassee FL 32308 City/State/Zip	SEGRETARY OF STATES TALLAHASSEE, FLORIDA	

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.

Panela Bush
(Signature)

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

Control No. 050

## STATE OF GEORGIA

Secretary of State

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

# CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

### **TUBZ PLUS, LLC**

#### **Domestic Limited Liability Company**

was formed or was authorized to transact business on 01/27/2005 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated 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 date issued. 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 certificate is issued pursuant to 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.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 15th day of June, 2011

B:Ph

Brian P. Kemp Secretary of State

Certification Number: 7554103-1 Reference:

Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp