M11000003720

·
(Requestor's Name)
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PICK-UP WAIT MAIL
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JUL 25 2011

EXAMINER



200209814922

TO ACKNOWLEDGE TO ACKNOWLEDGE SUFFICIENCY OF FILING RECEIVED

DEPARTMENT OF STATE
STATE OF CORPORATIONS
2011 JUL 22 PM 4: 08

DIVISION OF COMPORATIONS



ACCOUNT NO. : 12000000195						
REFERENCE : 854969 4351017						
AUTHORIZATION : Spelbelena 2						
COST LIMIT : \$425.00						
REFERENCE : 854969 4351017 AUTHORIZATION : Spelbelene Cost Limit : \$425.00 ORDER DATE : July 22, 2011						
ORDER TIME : 12:35 PM						
ORDER NO. : 854969-010						
CUSTOMER NO: 4351017						
FOREIGN FILINGS NAME: MG DISTRIBUTION, LLC						
XXXX QUALIFICATION (TYPE: LL)						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING						
CONTACT PERSON: Troy Todd EXT# 2940						
EXAMINER:						

COVER LETTER

то:	Registration Section Division of Corporations	152
	ECT: MG Distribution, LLC	
SUBJI		me of Limited Liability Company
		bility Company for Authorization to Transact Business in Florida," Certificate of bove referenced foreign limited liability company to transact business in Florida
Please	return all correspondence concerning this ma	atter to the following:
	Jon Heard	
		Name of Person
	MG Distribution, LLC	
		. Firm/Company
	1310 Union Street	
		Address
	Spartanburg, SC 29302	
		City/State and Zip Code
	jon.heard@merit-group.com	
	·	to be used for future annual report notification)
For fur	ther information concerning this matter, plea	ase call:
Efrain R. Miron		at (310) 788-4767
	Name of Person	Area Code & Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclo	sed is a check for the following amount \$125.00 Filing Fee \$130.00 Filing Fe	ee & S155.00 Filing Fee & S160.00 Filing Fee, Certificate

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

	MPLIANCE WI EDLIABILITY C							IS S	SUBMITTED	W	REGISTER	A	FOREIGN
1. <u>M</u>	G Distribution (Name of Force)	n, LLC ign Limited Li	iability C	ompany; r	nust include	"Lim	ted Linbility (Comp	pany," "L.L.	C.,"	or "I.LC.")		

MG South Florida Distribution, 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. Illinois

(FEI number, if applicable)

4.	06/22/2011	5.	Perpetual
	(Date of Organization)		(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. 1310 Union Street

Spartanburg, SC 29302

(Street Address of Principal Office)

8. If limited liability company is a manager-managed company, check here

The name and usual business addresses of the managing members or managers are as follows:
 10th Lane Partners, LLC, a Delaware limited liability company
 One Grand Central Place, 60 East 42nd Street, Suite 1400, New York, NY 10165

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 translation must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: Paint sundries distributor and sales.

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.)

Kenneth Lau

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.

 The name of the Limited Liability (Company is:					
MG Distribution, LLC						
If unavailable, the alternate to be used MG Florida Distribution, LLC	in the state of Florida is:					
2. The name and the Florida street add	dress of the registered agent and office are:					
Corporation Service Company (Name)						
1201 Hays Street Florida Stre	et Address (P.O. Box NOT ACCEPTABLE)					
Tallahassee	FL 32301 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.

Corporation Service Company

By:

(Signature)

Troy Todd

as its agent

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

WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

We, the undersigned, do hereby certify that we	are the Managers and/or Managing
Members of MG Distribution, LLC	
(Name of Limited Li	ability Company)
a limited liability company duly organized and	existing under the laws of
Illinois	,
(State or Country of Organization)	•
Because the name of this foreign limited liability	ity company does not satisfy the
requirements of the s. 608.406, F.S., the limite	d liability company hereby adopts the
following name to transact business in the state	e of Florida:
MG South Florida Distribution, LLC	
(Name to be used by limited liability company in Florida, NC Company, L.L.C., or LI.C.)	TH: Name must end with Limited Liability
Date:	
Signature(s) of Manager(s) and/or Managing N	
Kenneth Lau	12 ml

File Number

0357834-8



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

MG DISTRIBUTION, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON JUNE 22, 2011, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.



Authentication #: 1119902156

Authenticate at: http://www.cyberdriveillinois.com

In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 18TH

day of

JULY

A.D.

2011

Desse White

SECRETARY OF STATE