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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
W1100005	15857	

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SECRETARY OF STATE FOR INC.

D. BRUCE

SEP 1 3 2011

EXAMINER



Division of Corporations

September 6, 2011

JODIE CONGDON, EA PALM TREE TAX & CONSULTING, INC. 3859 BEE RIDGE RD, SUITE 101 SARASOTA, FL 34233

SUBJECT: BLAKLADER, LLC Ref. Number: W11000045857

We have received your document for BLAKLADER, LLC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

The fees to file a Florida Limited Liability Company or register a Foreign Limited Liability Company are as follows: \$100 filing fee; and \$25 registered agent designation fee. Please include an additional \$30 for each certified copy requested (optional) and \$5.00 for each certificate of status requested (optional).

There is a balance due of \$55.00.

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) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 111A00020584-

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COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: BLAKLADER, LLC				
	of Limited Liability Company			
The enclosed "Application by Foreign Limited Liabili Existence, and check are submitted to register the abo	ity Company for Authorization to Transact Business in ve referenced foreign limited liability company to trans	Florida," act busin	Certifi less in l	cate of Florida
Please return all correspondence concerning this matter	er to the following:			
JODIE CONGDON				
	Name of Person			
PALM TREE TAX & CONS	ULTING, INC.			
	Firm/Company			
3859 BEE RIDGE RD, SU	JITE 101			
	Address			
SARASOTA, FL 34233		景点		
	City/State and Zip Code	SR	33	""
JODIE@PALMTREETA	be used for future annual report notification)	TARIY ASSE	12	Carrieria Carrieria
	,	H-0	>>> 	ודן
For further information concerning this matter, please	call:	013		O
JODIE CONGDON	at (941) 921-7256	F STATE FLORIDA	000	
Name of Person	Area Code & Daytime Telephone Number			
	STREET ADDRESS: Division of Corporations			
	Registration Section Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301			
Enclosed is a check for the following amount	t:			
\$125.00 Filing Fee \$130.00 Filing Fee Certificate of Status	& \$\Bigsim \$155.00 \text{ Filing Fee & \$\Bigsim \$160.00 \text{ Filing Fee,}		te	

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.

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. BLAKLADER, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
BLAKLADER FL, 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. MINNESOTA 3. 20-4823061
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4. <u>03/23/06</u> 5. PERPETUAL
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6. <u>N/A</u>
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 6311 PORTER RD, STE 1, SARASOTA, FL 34240
C
(Street Address of Principal Office)
() >
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:
S. MARCUS CARLBERG 음류 😪
6311 PORTER PARK RD, STE 1
SARASOTA, FL 34240
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: WHOLESALE CLOTHING
DISTRIBUTOR
Signature of a member of 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 (elony as provided for in s.817.155. F.S.)

Typed or printed name of signee

JODIE CONGDON

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:	
BLAKLADER, LLC	
If unavailable, the alternate to be used in the state of Florida is:	——————————————————————————————————————
BLAKLADER FL, LLC	
2. The name and the Florida street address of the registered agent and office are:	T SEP
PALM TREE TAX & CONSULTING, INC (Name)	E L SSEE. I
3859 BEE RIDGE RD, SUITE 101 Florida Street Address (P.O. Box NOT ACCEPTABLE)	W OB STATE STATE FLORIDA
SARASOTA FL 34233 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)

state of Minnesota

SECRETARY OF STATE

Certificate of Good Standing

I, Mark Ritchie, Secretary of State of Minnesota, do certify that: The limited liability company listed below is a limited liability company formed or registered to do business under the laws of Minnesota; the limited liability company was formed by the filing of articles of organization or registered to do business by filing an application for a certificate of authority with the Office of the Secretary of State on the date listed below; the limited liability company is governed by Chapter 322B of Minnesota Statutes; and this limited liability company is authorized to do business as a limited liability company at the time this certificate is issued.

Name: Blaklader, LLC

Date Formed or Registered: March 23, 2006

State of Organization: Minnesota

This certificate has been issued on August 25, 2011.



Mark Ritchie Secretary of State