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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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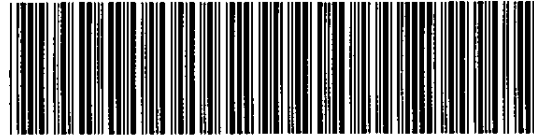
(Business Entity Name)

(Document Number)

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12 MAR -5 AM 9:29  
TALLAHASSEE, FLORIDA  
DIVISION OF CORPORATIONS  
STATE OF FLORIDA

FILED  
12 MAR -5 AM 9:53  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

J. BRYAN

MAR -5 2012

EXAMINER

712A-8442

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Streamline Installations 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:

William B Elliott  
Name of Person

Streamline Installations LLC  
Firm/Company

106 N. Sandlewood Circle  
Address

Daphne, AL 36526  
City/State and Zip Code

belliott0616@gmail.com  
E-mail address: (to be used for future annual report notification)

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12 MAR -5 AM 9:53  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

William B Elliott at ( 251 ) 209-6527  
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

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee    ☐ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy    ☒ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN  
LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. Streamline Installation LLC.  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

Streamline Installer 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. Alabama  
(Jurisdiction under the law of which foreign limited liability  
company is organized)

3. 41-2255140  
(FEI number, if applicable)

4. October 18, 2007  
(Date of Organization)

5. Perpetual  
(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. 106 N. Sandlewood Circle Daphne AL 36526

(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:

William B Elliott 106 N. Sandlewood circle Daphne, AL 36526

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: Mobile Home  
installation

William B Elliott

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.)

William B Elliott

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.

1. The name of the Limited Liability Company is:

Streamline Installations LLC

If unavailable, the alternate to be used in the state of Florida is:

Streamline Installer LLC

2. The name and the Florida street address of the registered agent and office are:

In Corp Services, Inc.

(Name)

17888 67<sup>th</sup> Court North

Florida Street Address (P.O. Box NOT ACCEPTABLE)

Loxahatchee FL 33470

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.*

William B. Elliott

(Signature)

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

FILED  
12 MAR '15 AM 9:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Beth Chapman  
Secretary of State

P. O. Box 5616  
Montgomery, AL 36103-5616

# STATE OF ALABAMA

**I, Beth Chapman, Secretary of State of Alabama, having custody of the  
Great and Principal Seal of said State, do hereby certify that**

the entity records on file in this office disclose that Streamline Installation LLC  
was formed in Baldwin County, Alabama on October 18, 2007. The Alabama  
Entity Identification number for this entity is 411-488. I further certify that the  
records do not disclose that said entity has been dissolved, cancelled or  
terminated.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



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In Testimony Whereof, I have hereunto set my  
hand and affixed the Great Seal of the State, at the  
Capitol, in the city of Montgomery, on this day.

3/1/2012

Date

*Beth Chapman*

Beth Chapman

Secretary of State