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PICK-UP WAIT MAIL
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SECRETARY OF STATE

2 APR 23 PH 2: \$9



April 20, 2012

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: Simec LLC

Dear Filing Officer:

Please file the attached Application for Authority for the referenced company. Enclosed please find a check for the requisite fees. Please return evidence of filing to my attention via regular mail.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (800) 862-5438. Thank you very much for your assistance.

Very truly yours,

Linda Stauffer Client Specialist

Enclosures

COVER LETTER

TO:

Registration Section

Division of Corporations
SUBJECT: Simec 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:
Linda Stauffer
Name of Person
NRAI Corporate Services
Firm/Company
1021 Main Street, Suite 1150
Address
Houston, Texas 77002
City/State and Zip Code.
mslapp@gmail.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Linda Stauffer at (800) 862-5438
Name of Person Area Code & Daytime Telephone Number
MAILING ADDRESS: STREET ADDRESS: Division of Corporations Division of Corporations
Registration Section Registration Section
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle
Tallahassee, FL 32301
Enclosed is a check for the following amount: \$\int_{\text{S125.00 Filing Fee}} \int_{\text{S130.00 Filing Fee}} \int_{\text{Certificate of Status}} \int_{\text{S155.00 Filing Fee}} \int_{\text{Certified Copy}} \int_{\text{S160.00 Filing Fee}} \int_{\text{S160.00 Filing Fee}} \int_{\text{Certified Copy}} \int_{\text{S160.00 Filing Fee}} \int_{\text{Certified Copy}} \int_{\text{S160.00 Filing Fee}} \int_{\text{Certified Copy}} \int_{\text{S160.00 Filing Fee}} \int_{\text{S160.00 Filing Fee}} \int_{\text{Certified Copy}} \int_{\text{S160.00 Filing Fee}} \i

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 TRAINSACT BUSINESS IN THE STATE OF PLORIDA.	
1. Simec LLC	
(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 will consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability	
Company," "L.L.C," "LLC.")	
2. Delaware (Jurisdiction under the law of which foreign limited liability 3. 80-0746736 (FEI number, if applicable)	
company is organized)	
4 August 5, 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. 1608 S. Ashland Ave #69707, Chicago, IL 60608	
(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:	
7. The hame and usual business addresses of the managing members of managers are as follows.	
Michael Slapp, 173 MacDougal St, APT PHW, New York, NY 10011	
O/ T 4000 O A	
Stephen Thayer, 1608 S. Ashland Ave #69707, Chicago, IL 60608	
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of recon	ds 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:	
brokering the supply of electricity and natural gas to commercial and residen her counts.	
The first R	
Signature of a member or an authorized representative of a member 25	
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the	ì
periation of perjary that the facts affect the day, I will be the track and the same trac	
document to the Department of State constitutes a third degree felony as provided for in s.847055, [.s.) Michael Slapp, Managing Member	١.
Typed or printed name of signee	
1) pou or printeu nume or bigue	

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:
Simec LLC	
If unavailable, th	ne alternate to be used in the state of Florida is:
2. The name and	d the Florida street address of the registered agent and office are:
ı	NRAI Services, Inc.
•	(Name)
.	515 East Park Avenue
	Florida Street 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.

NRAI Services, Inc.

Linda Stauffer, Assistant Secretary

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

PAGE

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "SIMEC LLC" IS DULY FORMED UNDER THE

LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A

LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF

THE TWENTIETH DAY OF APRIL, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SIMEC LLC"
WAS FORMED ON THE FIFTH DAY OF AUGUST, A.D. 2011.

5020822 8300

120455314

Jeffrey W. Bullock, Secretary of State

AUTHENTYCATION: 9518410

DATE: 04-20-12

You may varify this certificate online at corp.delaware.gov/authver.shtml