# M13000005613

(Re	equestor's Name)	
. (Ac	ddress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	<u>.</u>
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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	Office Use Onl	v



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#### **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT

#### Mitchell Brothers 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:

James	S Mitchell				_	
	Na	me of Person				
Mitchell	Brothers LL	С				
	Fir	m/Company				
1403 D	arden Avenu	е				
		Address			_	
Albertvi	lle AL 35951			v4	<b>~</b> )	
	City/St	ate and Zip Code		三点		
jim@mi	tchell-brother	rs.com		部 (**) (**) (**)	2013 SEP :	3400
	E-mail address: (to be used	for future annual	report notification)	277	‡_ !	r
For further information concerning	g this matter, please call:					
Mike Ivey		<sub>at</sub> 256	878-9850	FAIR	AM 9: 32	1
Name	of Person Area	Code & Daytime	Telephone Number	2.*		
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	Division Registra Clifton 2661 Ex	T ADDRESS: n of Corporations ation Section Building secutive Center Ci ssee, FL 32301	rcle			
Enclosed is a check for the f  \$125.00 Filing Fee	ollowing amount:  \$\Bigsire\$ \$\\$130.00 \text{ Filing Fee & Certificate of Status}\$	□ \$155.00 Filir Certified Co		Filing Fee		ate

### 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 Mitchell Brothers LLC, (Name of Limited Liability Company)
a limited liability company duly organized and existing under the laws of
A labama
(State or Country of Organization)
Because the name of this foreign limited liability company does not satisfy the
requirements of the s. 608.406, F.S., the limited liability company hereby adopts the
following name to transact business in the state of Florida:
Mitchell Vending LLC (Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability
Company, L.L.C., or LLC.)
Date: 08/12/20/3
Signature(s) of Manager(s) and/or Managing Member(s):
- Manager mensee 3 5
32 32 32

CR2E122 (7/07)

### 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. Mitchell Brothers LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
Mitchell Vending LLC
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the writt consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")
<sub>2.</sub> Alabama <sub>3.</sub> 63-1206115
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. 07/01/1998 5. Perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6. 07/01/2013
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 1403 Darden Avenue
Albertville AL 35951
(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:
James S Mitchell 1403 Darden Avenue Albertville AL 35951
Joseph Todd Mitchell 1403 Darden Avenue Albertville AL 35951
Joel Shannon Mitchell 140 N Main Street Boaz AL 35957
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of record 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: Coin Operated
Vending Machines and Amusement Machines
Signature of a member or an authorized representative of a member.
Signature of a member or an authorized representative of a member.
(In accordance with accion 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.)
James S Mitchell
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:
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# Mitchell Brothers LLC If unavailable, the alternate to be used in the state of Florida is: Mitchell Vencling LLC

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

James S Mitche	ell	
	(Name)	
5476 Mobile Hi	ghway	2013 SEI
Florida Street Ad	SEP SEP	
Pensacola	<sub>FL</sub> 35226	- I
City/State/Zip		7. S.
		32 32

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 Alabama Department of Revenue

#### **Certificate of Good Standing**

MITCHELL BROTHERS LLC is in compliance with the Alabama business privilege tax payment and return requirements in Chapter 14A, Title 40, Code of Alabama 1975 as of the date of issuance. This certificate is valid for sixty days from the date of issuance.

IN WITNESS WHEREOF, I hereunto set my hand this date of August 02, 2013.

Director, Individual and Corporate Tax Division

ATTEST:

Secretary

**Business Privilege Tax** 

Phone: 334-353-7923 Fax: 334-242-8915

Request Date: July 31, 2013 Request Code: 1307311652796