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#### **COVER LETTER**

TO:	Registration Section
	Division of Corporations

Safety Improvements 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:

	Ū	
David Stoltzfus		
N	lame of Person	
Safety Improvemen	ts LLC	
F	irm/Company	
11753 Chesterville	Road	
	Address	
Kennedyville, MD 2	1645	
City/S	State and Zip Code	
david@rumblestripp	_	
E-mail address: (to be use	d for future annual	report notification)
For further information concerning this matter, please call:		
Debbie Orr	410	648-5582

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 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. Safety Improvements LLC	
(Name of Foreign Limited Liability Company; must includ	e "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose consent of the managers or managing members adopting the altern Company," "L.L.C," "LLC.")	e of transacting business in Florida and attach a copy of the written name. The alternate name must include "Limited Liability
<sub>2.</sub> Maryland <sub>3.</sub>	80-0522297
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4. 12-11-2009 <sub>5.</sub>	Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6(Date first transacted business in Flor	ildo (finales to registration)
(See sections 608.501 & 608.502 F.S. t	to determine penalty liability)
7. 11753 Chesterville Road	<u> </u>
Kennedyville, MD 21645	
(Street Address o	of Principal Office)
8. If limited liability company is a manager-managed c	ging members or managers are as follows:
9. The name and usual business addresses of the mana	ging members or managers are as follows
David Stoltzfus 29150 Ricks Landing	
Raymond Stoltzfus 1020 Blanco Roa	ad, Millington, MD 21651
Johnathan Stoltzfus 12867 Chesterv	rille Road, Galena, MD 21635
10. Attached is an original certificate of existence, no more than 90 of the jurisdiction under the law of which it is organized. (A photocopy translation of the certificate under oath of the translator must be subn	• • • • • • • • • • • • • • • • • • • •
11. Nature of business or purposes to be conducted or	promoted in Florida: Installation of
Ground in Rumble Strips	
Air	•
Signature of a member or an auti	norized representative of a member.
	tion of this document constitutes an affirmation under the

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.)

David Stoltzfus

### 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:	
Safety Improvements LLC	
If unavailable, the alternate to be used in the state of Florida is:  Safety Improvements	

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

Corporation Service Company	
	(Name)
1201 Hays Stre	eet
Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Tallahassee	<sub>FL</sub> 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.

(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 MARYLAND Department of Assessments and Taxation

I, PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO LIMITED LIABILITY COMPANIES, OR THE RIGHTS OF LIMITED LIABILITY COMPANIES TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT SAFETY IMPROVEMENTS, LLC, REGISTERED DECEMBER 11, 2009, IS A LIMITED LIABILITY COMPANY EXISTING UNDER AND BY VIRTUE OF THE LAWS OF THE STATE OF MARYLAND, AND THAT THE LIMITED LIABILITY COMPANY IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING TO TRANSACT BUSINESS.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS AUGUST 02, 2013.

Paul B. Anderson Charter Division

Paul B. Under



301 West Preston Street, Baltimore, Maryland 21201 Telephone Balto. Metro (410) 767-1340 / Outside Balto. Metro (888) 246-5941 MRS (Maryland Relay Service) (800) 735-2258 TT/Voice Fax (410) 333-7097