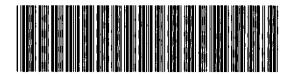
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| (Requestor's Name)                      |
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|   |
| (Address)                               |
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| (Addiess)                               |
|   |
| (City/State/Zip/Phone #)                |
|   |
| PICK-UP WAIT MAIL                       |
| •                                       |
| (Business Entity Name)                  |
| ,                                       |
|   |
| (Document Number)                       |
|   |
| Certified Copies Certificates of Status |
|   |
| Consideration to Effect Officer         |
| Special Instructions to Filing Officer: |
|   |
|   |
| OCT 2 3 2013                            |
| A. LUNT                                 |
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|   |

Office Use Only



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#### **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT

Sunset Sunrooms, 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:

| Calvin Lars Christens           | sen                        |              |     |
|---------------------------------|----------------------------|--------------|-----|
| Nam                             | e of Person                |              |     |
| Sunset Sunrooms, LI             | _C                         |              |     |
| Firm                            | /Company                   | 22           |     |
| 8184 Quarry View Ci             | rcle                       | 2013 OC      | ••• |
|                                 | Address                    |              | 17  |
| Maumee, Ohio 4353               | 37                         | 100 mg       | ŧ   |
| City/Stat                       | e and Zip Code             |              | i,  |
| lars_christensen@ya             |                            | क्षा का      |     |
| E-mail address: (to be used for | or future annual report no | otification) |     |

For further information concerning this matter, please call:

| Lars Christensen         | <sub>at</sub> 732 998 3307           |
|--------------------------|--------------------------------------|
| 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:

□ \$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:

| IMITEDIABILITY COMPANY TO TRANSACT BUSINESS IN TE  | HESTATEOFFICIGIJA:  |
|--|---|
| 1. Sunset Sunrooms, LLC  | lude "Limited Liability Company," "L.L.C.," or "LLC.")  |
| Sunset Restoration Services, LLC   | ude Elilited Elability Company, E.E.C., of EEC.   |
| (If name unavailable, enter alternate name adopted for the purp  | ose of transacting business in Florida and attach a copy of the written ernate name. The alternate name must include "Limited Liability |
| 2. Ohio  | 3 20-0778002  |
| (Jurisdiction under the law of which foreign limited liability company is organized)   | (FEI number, if applicable)   |
| <sub>4.</sub> 2/23/2004  | <sub>5</sub> perpetual  |
| (Date of Organization)   | (Duration: Year limited liability company will cease to exist or "perpetual")   |
| 6  |   |
| (Date first transacted business in F<br>(See sections 608.501 & 608.502 F.   | lorida, if prior to registration.) S. to determine penalty liability)   |
| 7. 8184 Quarry View Circle   | S. to determine penalty liability)  |
| Maumee, Ohio 43537   | 2 2   |
| (Street Addres   | is of Principal Office)   |
| 8. If limited liability company is a manager-managed   |   |
| 9. The name and usual business addresses of the ma   | naging members or managers are as follows:  |
| Calvin Lars Christensen  |   |
|  | <del></del>   |
| 10. Attached is an original certificate of existence, no more than 9 the jurisdiction under the law of which it is organized. (A photoe translation of the certificate under oath of the translator must be su |   |
| 11. Nature of business or purposes to be conducted of  | or promoted in Florida:   |
| Certified General Contractor/Certific  | •   |
| a Lous conste  |   |

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.)

Calvin Lars Christensen

### 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.

| If unavailable, t | he alternate to be used in the st | ate of Florida is:   |                |          |
|-------------------|-----------------------------------|----------------------|----------------|----------|
| Sunset Restore    | ation Services, LLC               |                      |                |          |
| 2. The name an    | d the Florida street address of t | the registered agent | and office are | <b>:</b> |
|                   | InCorp                            | Services, Inc.       |                |          |
|                   |                                   | (Name)               |                |          |
|                   | 17888 6                           | 7th Court North      | ,              | 2013 OCT |
|                   | Florida Street Address            | S (P.O. Box NOT ACCE | PTABLE)        | <u> </u> |
|                   | Lavahatahan                       | r'' I                | 33470          |          |
|                   | Loxahatchee                       | <u>FL</u>            |                |          |

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

on behalf of Incorp Services, Inc.

# UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STATE

I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show SUNSET SUNROOMS, LLC, an Ohio Limited Liability Company, Registration Number 1443840, was organized within the State of Ohio on February 23, 2004, is currently in FULL FORCE AND EFFECT upon the records of this office.



Manness my hand and the seal of the Secretary of State at Columbus, Ohio this 9th day of October, A.D. 2013.

**Ohio Secretary of State** 

an Hastel

Validation Number: 201328200369

F APROVE SUNSET RESTORATION SERVICES,

LLC IF SUNSET SUNROOMS UNAVALLABLE

CALVIN LARS CHRISTENSEN

c. for anto

MANAGING MEMBER