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COVER LETTER

Division of Corporations
SUBJECT: FIRE Trucks, Parties + More, 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:
Wilbur T. Fields Name of Person
FIRETRUKS, PArties + MORE, LLC Firm/Company
P.O. Box 600666 Address
TACKSONUITE F1 32260 City/State and Zip Code
E-mail address: (so be used for future annual report notification)
For further information concerning this matter, please call:
Wilbur T. Files at (904) 254-2299 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: \$\Begin{array} \\$125.00 \] \Filing Fee \Begin{array} \Begin{array} \\$130.00 \] \Filing Fee \Begin{array} \Begin{array} \\$155.00 \] \Filing Fee \Begin{array} \Begin{array} \\$160.00 \] \Filing Fee, Certificate Certificate of Status \Begin{array} \Certificate \Conv. \\ \Certificate \Conv. \

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 First are Danking & marchine
1. Fire Truers Parties + more LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
FTP + MORE, 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 DELQUIARE 3. 46-3889653
2. DE laware (Jurisdiction under the law of which foreign limited liability company is organized) 3. 46-3889653 (FEI number, if applicable)
4. OCT 25 2013 (Date of Organization) 5. WA (Duration: Year limited liability company will cease to
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6 15 NOV 7 013
6. 15 Nov 2013 (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
(See sections 608.501 & 608.502 F.S. to determine penalty hability)
7. 5535 Shad Rd Units 6+7
TACKSONVILLE I-1 32257 (Street Address of Principal Office)
Street Address of Principal Office)
(Sureet Address of Frincipal 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:
Wilbur T. FIELDS
Wilbur T. FIELDS P.O.BOX 600666
JACKSONVILLE F/ 32260
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: First Truck
+ Parade Display to Include Birthday Parties Sucials + 95theraps
+ Porede Display to Include Birthday Parties, Sucials + 94thenrys With J. Sant 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 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.)
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:		
FIRETRUCKS Parties & MORE, INC	_	
If unavailable, the alternate to be used in the state of Florida is:		
FTP 4 MORE, INC	_	
2. The name and the Florida street address of the registered agent and office are:	~3	
Wilhur T. Fitos (Name)	2813 OCT 31	FILE
1044 Buckbean BR. LN W Florida Street Address (P.O. Box NOT ACCEPTABLE)	PN 4: 07	0
ST. Johns FL 3229 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.

Will J. Suil (Signature)

\$ 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 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "FIRETRUCKS, PARTIES AND MORE 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 TWENTY-FIFTH DAY OF OCTOBER, A.D.

2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5417794 8300

131237052

AUTHENTY CATION: 0844138

DATE: 10-25-13

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