

M14 00 0002362

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

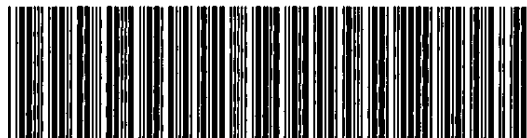
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700258372987

04/07/14--01003--002 **125.00

FILED
14 APR -7 11:11:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR 08 2014



April 3, 2014

VIA US MAIL

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

RE: Authorization to do business for Autorotate, LLC
Our File No.: 1044-01

To Whom It May Concern,

Enclosed please find, for the authorization of Autorotate, LLC, a New Mexico limited liability company, to do business in Florida, the following:

1. Cover Letter;
2. Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida;
3. Certificate of Designation of Registered Agent/Registered Address;
4. Certificate of Good Standing from the New Mexico Secretary of State; and
5. This firm's check number 1250 in the amount of One Hundred Twenty Five Dollars (\$125).

Upon completion of the processing of the application, please send confirmation to the undersigned at 1499 NE 60th Street, Fort Lauderdale, Florida 33334 (if by mail); keridowling@airlawoffice.com (if by email); and/or 954-772-6586 (if by fax). Should you have any questions, or wish to discuss this or any other matter, please feel free to contact me at your convenience.

Sincerely,

Keri L. Dowling
keridowling@airlawoffice.com

KLD/
enclosure(s)

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Autorotate, 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:

Keri L Dowling

Name of Person

Air Law Office, P.A.

Firm/Company

1499 NE 60th Street

Address

Fort Lauderdale, FL 33334

City/State and Zip Code

keridowling@airlawoffice.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Keri L Dowling

Name of Contact Person

at (**954**) **772-6586**

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
TRANSACTION BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A
FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. **Autorotate, 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. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. **New Mexico**

(Jurisdiction under the law of which foreign limited liability company is organized)

3. **20-0388865**

(FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. _____

482 Mariner Dr, Jupiter FL 33477

(Street Address of Principal Office)

6. _____

482 Mariner Dr, Jupiter FL 33477

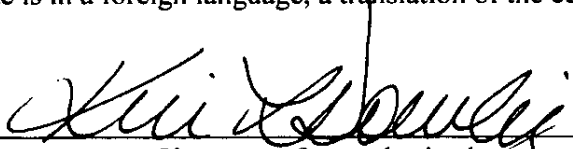
(Mailing Address)

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Johnny C. Gray, Manager

FILED
14 APR -7 4:10 PM '20
SECRETARY OF STATE
TALLAHASSEE FLORIDA

8. 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)



Signature of an authorized person

(In accordance with section 605.0203, 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.)

Keri L. Dowling

Typed or printed name of signee

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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:

Autorotate, LLC

If unavailable, the alternate to be used in the state of Florida is:

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

Keri L. Dowling

(Name)

1499 NE 60th Street

Florida Street Address (P.O. Box NOT ACCEPTABLE)

Fort Lauderdale

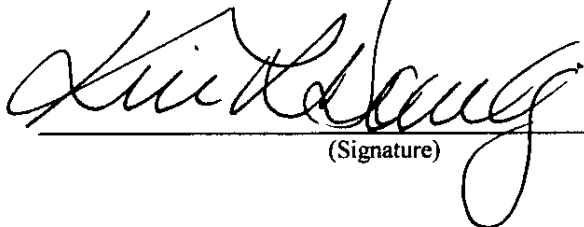
FL

33334

City/State/Zip

FILED
14 APR -7 AM 10:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 605, 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)

OFFICE OF THE SECRETARY OF STATE NEW MEXICO

Certificate of Good Standing and Compliance

IT IS HEREBY CERTIFIED THAT:

**AUTOROTATE LLC
2401271**

An organization organized under the laws of New Mexico is duly authorized to transact business in New Mexico, as a Domestic Limited Liability Company, under the

Limited Liability Company Act - (53-19-1 To 53-19-74 NMSA 1978)

having filed its Articles Of Organization on November 18, 2003 and Certificate Of Organization issued as of said date.

It is further certified that the fees due the Office of the Secretary of State which have been assessed against the above named entity, have been paid to date and is in corporate good standing and duly authorized to transact business as its corporate existence has not been revoked in New Mexico. This certificate is not to be construed as an endorsement, recommendation, or notice of approval of the entities financial condition or business activities and practices.

This good standing status expires when existence ceases as provided by law.

Certificate issued on **April 3, 2014**

In testimony whereof, the Office of the Secretary of State has caused this certificate to be signed on this day in the city of Santa Fe, and the seal of said office to be affixed hereto.



**Dianna J. Duran
Secretary of State**

FILED
14 APR - 7 AM 10:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA