# M14000003344

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ACCOUNT NO. : I2000000195 REFERENCE : 134851 4719707 AUTHORIZATION : ( COST LIMIT : ORDER DATE: May 15, 2014 ORDER TIME : 8:54 AM ORDER NO. : 134851-005 CUSTOMER NO: 4719707 FOREIGN FILINGS NAME: ARROW CREEK LEASING LLC XXXX QUALIFICATION (TYPE: LL) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING CONTACT PERSON: Emily Gray -- EXT# 62925

EXAMINER:

#### **COVER LETTER**

TO:	Registration Section
	Division of Corneration

SUBJECT: Arrow Creek Leasing 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:

Nora Jackson	
Name of Person	······································
Polsinelli PC	
Firm/Company	
900 W 48th Place, Suite 900	
Address	t as it is
Kansas City, MO 64112	56 F
City/State and Zip Code	
njackson@polsinelli.com	
E-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

Nora Jackson at (816 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 Certificate Copy □ \$130.00 Filing Fee Certificate Copy □ \$160.00 Filing Fee, Certificate Copy

### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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

(If name unavailable, enter alternate name adopted for the purpose of transacting Liability Company," "L.L.C," or "LLC.")	business in Florida. The alternate name must include "Limited
<sub>2</sub> Kansas <sub>3.</sub> 46	-5343863
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4 Upon Filing	<del>20</del>
(Date first transacted business in Florida, it (See sections 605.0904 & 605.0905, F.S. to de	f prior to registration.) ctermine penalty liability)
<sub>5</sub> 15720 West 108th - Suite 100	in the second se
Lenexa, KS 66210	pal Office)
(Street Address of Princi	pal Office)
<sub>6.</sub> 15720 West 108th - Suite 100	
Lenexa, KS 66210	் ச <u>ி</u>
(Mailing Addres	s)
·	
7. The name, title or capacity and address of the person(s) w	ho has/have authority to manage is/are:
7. The name, title or capacity and address of the person(s) was James W. Bedsworth, Jr., Manager - 1572	• •
	20 West 108th - Suite 100, Lenexa, KS 66210
James W. Bedsworth, Jr., Manager - 1572	20 West 108th - Suite 100, Lenexa, KS 66210

James W. Bedsworth, Jr.

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	of the Limited Liability Company is:		
ARROW CREE	K LEASING LLC		
If unavailable,	the alternate to be used in the state of Florida is:		
		<u></u>	2
2. The name a	nd the Florida street address of the registered agent and office are:		ZDIN MAY
	Corporation Service Company		ਗ
	(Name)		E H
	1201 Hays Street		GU TEL PM
	Florida Street Address (P.O. Box NOT ACCEPTABLE)		
	Tallahassee FL 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 605, Florida Statutes.

Corporation Service Company

By: Carina L. Dunlap

Asst. Vice President

(Signature)

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

# 2014 BAY 16 AH IO

#### STATE OF KANSAS OFFICE OF SECRETARY OF STATE KRIS W. KOBACH

I, KRIS W. KOBACH, Secretary of State of the state of Kansas, do hereby certify, that according to the records of this office.

Business Entity ID Number: 4806808

Entity Name: ARROW CREEK LEASING LLC

Entity Type: KANSAS LTD LIABILITY COMPANY

State of Organization: KS

Resident Agent: CORPORATION SERVICE COMPANY

Registered Office: 2900 SW Wanamaker Drive Suite 204, TOPEKA, KS 66614

was filed in this office on April 08, 2014, and is in good standing, having fully complied with all requirements of this office.

No information is available from this office regarding the financial condition, business activity or practices of this entity.



In testimony whereof I execute this certificate and affix the seal of the Secretary of State of the state of Kansas on this day of May 07, 2014

KRIS W. KOBACH SECRETARY OF STATE

Certificate ID: 606470 - To verify the validity of this certificate please visit <a href="https://www.kansas.gov/bess/flow/validate">https://www.kansas.gov/bess/flow/validate</a> and enter the certificate ID number.