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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

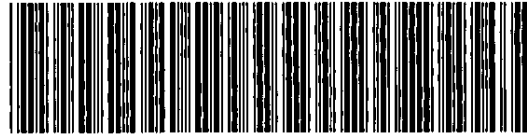
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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06/10/14--01016--008 \*\*125.00

16 JUN 10 4:10:10  
STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

ATTORNEYS AT LAW  
**SUTTON LAW OFFICE**

A PROFESSIONAL ASSOCIATION  
Admitted to Practice in Kansas and Missouri

Windmill Village Building Number 4  
7211 West 98<sup>th</sup> Terrace, Suite 140  
Overland Park, KS 66212

Telephone: (913) 385-0444  
Telefax: (913) 341-1130  
E-mail: [nate@suttonlaw.com](mailto:nate@suttonlaw.com)

June 3, 2014

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

Re: Reliable Transfer and Acquisition, LLC

Dear Sir:

Enclosed please find the following documents:

- 1) Application for Registration of a Foreign LLC in the State of Florida for Reliable Transfer and Acquisition, LLC
- 2) Certificate of Good Standing from the State of Kansas; and
- 3) Firm check for the \$125.00 filing fee.

Please send the approval certificate to my attention at the address above. If you have any questions, please advise.

Very truly yours,



Nathan M. Sutton

NMS:hm:enclosures

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Reliable Transfer and Acquisition, 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:

**Nathan M. Sutton**

Name of Person

**Sutton Law Offices, P.A.**

Firm/Company

**7211 W. 98th Terr, Suite 140**

Address

**Overland Park, KS 66212**

City/State and Zip Code

**rwashburn@networkdirect.com**

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

For further information concerning this matter, please call:

**Nathan M. Sutton**

Name of Contact Person

at **913**

Area Code

**385-0444**

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. **Reliable Transfer and Acquisition, 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. **Kansas**

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

3. \_\_\_\_\_

(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. **5360 College Boulevard, Suite 200**

**Overland Park, KS 66211**

(Street Address of Principal Office)

6. **5360 College Boulevard, Suite 200**

**Overland Park, KS 66211**

(Mailing Address)

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

**Thomas D. Lyons, Managing Member, 5360 College Blvd., Suite 200**

**Overland Park, KS 66211; and John Sadowski, 428 Pelican Bay Drive**

**Daytona Beach, FL 32119**

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.)

**John Sadowski**

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:

**Reliable Transfer and Acquisition, 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:

**John Sadowski**

(Name)

**428 Pelican Bay Drive**

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

**Daytona Beach**

**FL 32119**

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.*

  
(Signature)

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

RECEIVED  
TALLAHASSEE, FLORIDA  
14 JUN 10 10:10 AM '10

**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: 7729148

Entity Name: RELIABLE TRANSFER AND ACQUISITION, LLC

Entity Type: DOM: LTD LIABILITY COMPANY

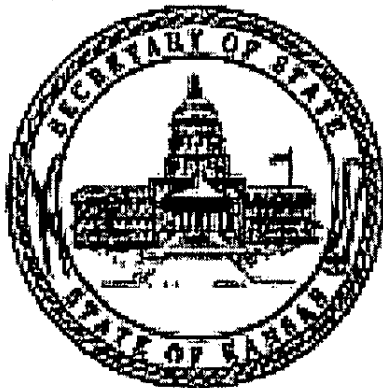
State of Organization: KS

Resident Agent: RICHARD WASHBURN

Registered Office: 5360 College Boulevard Suite 200, OVERLAND PARK, KS 66211

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 June 03, 2014

**KRIS W. KOBACH**  
**SECRETARY OF STATE**

Certificate ID: 608626 - To verify the validity of this certificate please visit <https://www.kansas.gov/bess/flow/validate> and enter the certificate ID number.

14 JUN 10 AM 10:10  
TALLAHASSEE, FLORIDA