

M14 000004982

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

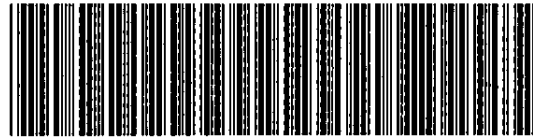
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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07/15/14--01017--005 **770.50

04/03/14--01017--002 **125.00

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FILED
U.S. DEPT. OF JUSTICE
FBI - NEW YORK

7/15 (526.25)
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19



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 7, 2014

BRANDON LORIO
1840 JUTLAND DR
HARVEY, LA 70058

SUBJECT: RETIF/BONIFAY, LLC
Ref. Number: W14000021829

We have received your document for RETIF/BONIFAY, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

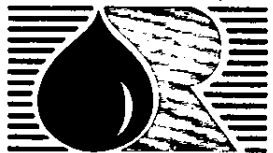
Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$770.50.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 814A00007341



RETIF OIL & FUEL

P.O. Box 58349
New Orleans, LA 70158-8349
(504) 349-9000

March 26, 2014

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

Dear Sir or Madam,

Please find attached the following documents:

1. Application by Foreign Limited Liability Corporation for Authorization to Transact Business in Florida
2. Certificate of Designation of Registered Agent/Registered Office
3. Check payable to FL Division of Corporations for \$125.00

Should there be any issues with the aforementioned documents, please do not hesitate to contact me at (504) 349-9000.

Sincerely,

Brandon Lorio, CPA
Chief Accounting Officer

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Retif Oil & Fuel, 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:

Brandon Lorio

Name of Person

Retif/Bonifay, LLC

Firm/Company

1840 Jutland Drive

Address

Harvey, LA 70058

City/State and Zip Code

blorio@retif.com

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

For further information concerning this matter, please call:

Brandon Lorio

Name of Person

504

at ()

349-9000

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 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. Retif/Bonifay, 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 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. Louisiana

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

3. 45-5490449

(FEI number, if applicable)

4. 4/2/2012

(Date of Organization)

5. Perpetual

(Duration: Year limited liability company will cease to exist or "perpetual")

6. January 1, 2012

(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. 527 Destrehan Avenue

Harvey, LA 70058

(Street Address of Principal 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:

Kenneth J. Retif

527 Destrehan Avenue

Harvey, Louisiana 70058

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: Rental property
and sale of retail fuel products

Kenneth J. Retif

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.)

Kenneth J. Retif

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:

Retif/Bonifay, 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:

Frank E. Bondurant

(Name)

4450 Lafayette Street

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

Marianna

FL

32447

City/State/Zip

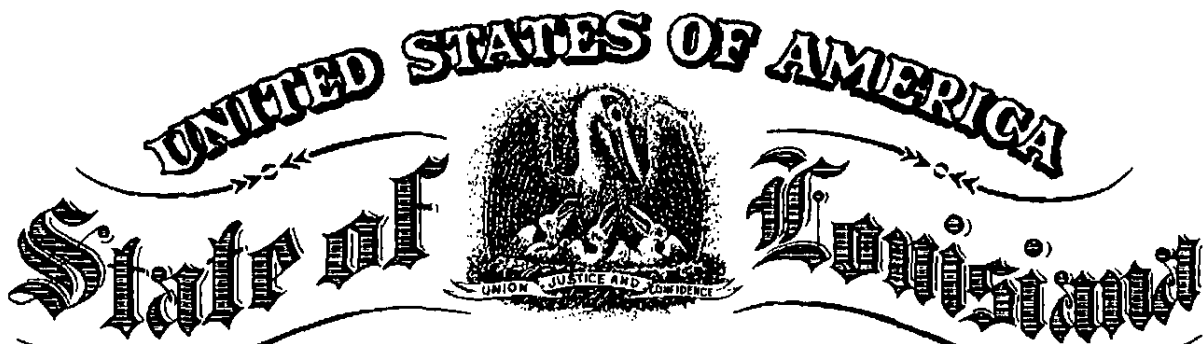
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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.



(Signature)

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

14 JUL 15 PM 3:17



Tom Schedler
SECRETARY OF STATE

As Secretary of State of the State of Louisiana I do hereby Certify that

the Articles of Organization of

RETIF/BONIFAY, LLC

Domiciled at HARVEY, LOUISIANA,

Were filed in this Office and a Certificate of Organization was issued on April 02, 2012,

I further certify that no Certificate of Dissolution has been Issued.

14 JUL 15 PM 3:17

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

March 26, 2014

Secretary of State

Web 40794644K



Certificate ID: 10475276#LUL73

To validate this certificate, visit the following web site, go to **Commercial Division, Certificate Validation**, then follow the instructions displayed.
www.sos.louisiana.gov