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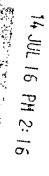
(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: 7L Resources, 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:			
Richard Chase			
Name of Person			
Lykes Bros. Inc.			
Firm/Company			
400 N. Tampa Street, Suite 1900			
Address			
Tampa, FL 33602			
City/State and Zip Code			
richard.chase@lykes.com			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Richard Chase 813 470-5070			
Name of Contact Person Area Code Daytime Telephone Number			
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301			
Enclosed is a check for the following amount: \$125.00 Filing Fee			

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 transacti Liability Company," "L.L.C," or "LLC.")	ng business in Florida. The alternate name must include "Limited
	7-1269842
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
(Date first transacted business in Florida	a. if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to	determine penalty liability)
400 N. Tampa Street, Suite 1900	
Tampa, FL 33602	in the second se
P. O. Box 1690	icipal Office)
Tampa, FL 33601	
(Mailing Add 7. The name, title or capacity and address of the person(s) Lykes Bros. Inc., Manager, 400 N. Tampa St	who has/have authority to manage is/are;
3. Attached is an original certificate of existence, no more that a compared to the second se	of which it is organized. (A photocopy is not
Lichoul Chose	
Signature of an autl In accordance with section 605.0203, F.S., the execution of this document constitutes a m aware that any false information submitted in a document to the Department of State	an affirmation under the penalties of perjury that the facts stated herein are
Richard Chase	

Typed or printed name of signee

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "7L RESOURCES, 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 FIFTEENTH DAY OF JULY, A.D. 2014.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "7L RESOURCES, LLC" WAS FORMED ON THE SEVENTEENTH DAY OF JUNE, A.D. 2014.

14 JUL 16 PM 2: 10

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140953814

AUTHENTICATION: 1534621

DATE: 07-15-14

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

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: 7L Resources, 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:	
Richard Chase	
(Name)	

400 N. Tampa Street, Suite 1900

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

Tampa 33602

FL

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.

Behow Kesse (Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)