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(Requestor's Name)
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(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
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Office Use Only



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FLORIDA DEPARTMENT OF STATE Division of Corporations

August 19, 2014

CORPORATE ACCESS, INC.

TALLAHASSEE, FL

SUBJECT: LENKBAR, LLC Ref. Number: W14000050521

We have received your document for LENKBAR, LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return 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.

Tammi Cline Regulatory Specialist II

Letter Number: 714A00017740

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INC.	

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L INSTRUCTIONS:		

COVER LETTER

TO:	Registration Section Division of Corporation	s					
SUBJE	ECT: Lenkbar, LLC						
		Name of Limit	ed Liability Compa	ny		········	
The end Existen	closed "Application by Foreice, and check are submitted	eign Limited Liability Com I to register the above refer	npany for Authoriz renced foreign lim	zation to Tra nited liability	nsact Business in Flor company to transact	rida," Certifi business in	icate of Florida
Please	return all correspondence co	oncerning this matter to the	e following:				
	Timothy M. O'Bi	rien					
		N	larne of Person				
	Lenkbar, LLC						
		F	ігт/Сотрапу				
					•		
	11430 Tamiami	Trail East			بي	<u>≫.ca</u>	
			Address		,		`
	Naples, FL 3411	3			ŗ	三角	2014 AUG 19
	11441100, 120 2111		State and Zip Code			公志	9
							70
	tim@lenkbar.com		· · · · · · · · · · · · · · · · · · ·				
		E-mail address: (to be use	d for future annual	report nounce	ition)	무럿	B
For fun	ther information concerning	this matter, please call:				高温	ယ္
	Timothy M. O'Brien		at (850	602-031	12		
	Name of	Contact Person	Area Cod	e Day	time Telephone Numbe	r	
	MAILING ADDRESS:	STRE	ET ADDRESS:				
	Division of Corporations		on of Corporations	5			
	Registration Section		ation Section				
	P.O. Box 6327		Building	n. 1			
	Tallahassee, FL 32314		executive Center Cassee, FL 32301	Lifele			
Enclos	sed is a check for the fo	ollowing amount:					
	S125.00 Filing Fee	S \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Fil Certified C		☐ \$160.00 Filing Fe of Status & Certi		te

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 purpos iability Company," "L.L.C," or "LLC.")	ose of transacting business in Florida. The alternate name must include "
	22 5407694
Delaware ' (Jurisdiction under the law of which foreign limited liability corrupany is organized)	3. <u>27-5402676</u> (FEI miniber, II applicable)
, , -	
	iness in Florida, if prior to registration.) 35.0905, F.S. to determine penalty liability)
·	Story, (1.5, to determine pointry (manny)
11430 Tamiami Trail East Naples, Florida, 34113	- Company
	Address of Principal Office)
, -	Audiess of Principal Office)
11430 Tamiami Trail East Naples, Florida, 34113	는 전 전 전 전 전 전 전 전 전 전 전 전 전 전 전 전 전 전 전
	ت ا
	(Mailing Address)
ee attached	e person(s) who has/have authority to manage is/are:
aving custody of records in the jurisdiction under	e, no more than 90 days old, duly authenticated by the der the law of which it is organized. (A photocopy is no lago, a translation of the certificate under oath of the translation of
aving custody of records in the jurisdiction unde cceptable. If the certificate is in a foreign langua nust be submitted)	der the law of which it is organized. (A photocopy is no raps a translation of the certificate under oath of the translation of
aving custody of records in the jurisdiction unde cceptable. If the certificate is in a foreign langua nust be submitted) Signature n accordance with section 605 0203, F.S., the execution of this docume	der the law of which it is organized. (A photocopy is no
aving custody of records in the jurisdiction unde cceptable. If the certificate is in a foreign languarust be submitted) Signature In accordance with section 605 0203, F.S., the execution of this document maware that any false information submitted in a document to the Deput	there the law of which it is organized. (A photocopy is not page, a translation of the certificate under oath of the translation of the certificate under oath of the translation of an authorized person nent constitutes an affirmation under the page titles of perjury that the facts stated

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:			
Lenkbar, LLC		 •		
If unavailable,	the alternate to be used in the state of Florida is:			
2. The name a	and the Florida street address of the registered agent and office are:	SECRETA ALLAHAS	2814 AUG 1	Read the second
	(Name)	RY GI	19 AM	To the second se
	236 East 6th Ave	 #####################################	άδ	i ,,,
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	골속	ဒ္ဌ	
	Tallahassee FL 32303			
	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.



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

ADDENDUM TO APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA FOR LENKBAR, LLC

7. Names, titles and addresses of people who have authority to manage are:

Name s	Title	Address
Timothy M. O'Brien	Manager	11430 Tamiami Trail East
		Naples, Florida, 34113
Rick Ferreira	Manager	11430 Tamiami Trail East
		Naples, Florida, 34113
Lou Lauch	Manager	11430 Tamiami Trail East
		Naples, Florida, 34113
Erik H. Papenfuss	Manager	11430 Tamiami Trail East
		Naples, Florida, 34113
Jon Pertchik	Manager	11430 Tamiami Trail East
		Naples, Florida, 34113 📑

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "LENKBAR, 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 AUGUST, 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 "LENKBAR, LLC"
WAS FORMED ON THE FIFTEENTH DAY OF AUGUST, A.D. 2014.

5587124 8300

141075315

AUTHENTACATION: 1623480

DATE: 08-15-14

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