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B. BOSTICK
SEP - 8 2014
EXAMINER

TO:

Registration Section Division of Corporations

RIECE: T & M MOTORSPORTS, 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:

Michael	Duncan							
		Name of	Person					
		Firm/Co	mpany			 		
1390 W	est Anza	Ct.						
	· · · · · · · · · · · · · · · · · · ·	Addı	ress					
Dunnello	on, FL 34	434						
	· · · · · · · · · · · · · · · · · · ·	City/State and	d Zip Code					
mike.dur	ncan1@y	ahoo.	com					
	E-mail address: (to			ort notification	on)			
For further information concerning	this matter, please o	call:						
Michael Dur	ncan	at (352	207-	8485		四日	
Name of	Contact Person	· ·	Area Code	Daytir	ne Telephone Nu	ımber	SEP	
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314]] (2	STREET AD Division of C Registration S Clifton Buildi 2661 Executiv Tallahassee, I	orporations Section ing ve Center Circ	le		CRY OF STATE	7-2 P 4: 2	
Enclosed is a check for the fo		: 'ee & □ \$	\$155.00 Filing Certified Copy		□ \$160.00 Filin of Status & 0	ıg Fee, Cei	tificate	

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:

1. T & M MOTORSPORTS, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "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 "LL.C.")
2. Nevada 3.
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. Upon Filing
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 1390 West Anza Ct., Dunnellon, FL 34434
(Street Address of Principal Office)
6. 1390 West Anza Ct., Dunnellon, FL 34434
SEP -
(Mailing Address)
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are.
Michael Duncan, Mgr, 1390 West Anza Ct., Dunnellon, FL 34434
Tina Pleacher, Mgr, 1390 West Anza Ct., Dunnellon, FL 34434
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)
Michael & lencar.
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 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.)

Typed or printed name of signee

Michael Duncan

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. 7	The nan	ie of the	Limited	Liability	Company	y is:
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T & M MOTORSPORTS, 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:

Michael Dun	can	
	(Name)	TATE OF THE PARTY
1390 West A	SEP	
Florida Stro	7 2	
Dunnellon	34434 FL	OF ST
	City/State/Zip	# 2.

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)

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **T & M MOTORSPORTS**, **LLC**, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since August 18, 2014, and is in good standing in this state.



Electronic Certificate
Certificate Number: C20140825-3269
You may verify this electronic certificate
online at http://www.nvsos.gov/

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on August 25, 2014.

ROSS MILLER Secretary of State SECTION OF STATE