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NAME:

STOVALL COLDWATER FARMS, LLC

TYPE OF FILING: APPLICATION

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ABBIE/PA(U

#### **COVER LETTER**

TO:	Registration Section
	Division of Corporations

Stovall Coldwater Farms, 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:

	Jarrad I	Principe		<u>.</u>		•			
			Name o	f Person					
Olympus Property									
			Firm/C	ompany					
2918 W. Park Row Drive									
			Add	iress					
	Panteg	o, Texas	7601	3-2041					
			City/State a	nd Zip Code					
	jarrad.p	rincipe@	•		_			_	
		E-mail address: (	to be used for i	uture annual rep	ort notific	cation)	<b>4</b>		
For further info	rmation concernin	g this matter, please	e call;					7	
Ja	rrad Prin	cipe	at	817	)	5-2836	7 75	- 130	runas
	Name o	f Contact Person		Area Code	Da	ytime Telephon	e Number →	<u> </u>	i Linear
Divisi Regist P.O. E	LING ADDRESS: on of Corporations tration Section Box 6327 hassee, FL 32314		STREET A Division of 0 Registration Clifton Build 2661 Execut Tallahassee,	Corporations Section ding cive Center Circ	ol <b>e</b>		OF STATE EC. FLORIDA	AM 9: 59	
	a check for the f 25.00 Filing Fee	following amour ☐ \$130.00 Filing Certificate of \$	Fee& 🗖	\$155.00 Filing Certified Cop	•		Filing Fee, C & Certified		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 purpose of transacting business in Florida. The alternate name m Liability Company," "L.L.C," or "LLC.")	ust include	:"Limit	ted
<sub>2.</sub> Delaware <sub>3.</sub> 77-0368085			
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)			
4			
(Date first transacted business in Florida, it prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)			
<sub>5.</sub> 2918 W. Park Row Drive			
Pantego, Texas 76013-2041			
(Street Address of Principal Office)	يتينو		
<sub>6.</sub> 2918 W. Park Row Drive	黑点	=	
Pantego, Texas 76013-2041	RE	001	
(Mailing Address)	337	1	द्वाराज्य स्थाराज्य
7. The name, title or capacity and address of the person(s) who has/have authority to manage	e is/are:	끚	라
W. Chandler Wonderly, Manager	でい	99	# # ####
2918 W. Park Row Drive	22	59	
Pantego, Texas 76013-2041			
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticate having custody of records in the jurisdiction under the law of which it is organized. (A photo acceptable. If the certificate is in a foreign language, a translation of the certificate under oath must be submitted)	copy is r	not	
Jon G. Petersen			
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 am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in	e facts state: n s.817.155.	l herein F.S.)	are true.
Ion C. Potoroon		,	

Jon G. Petersen

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 th	e Limited Liability Compar	ny is:			
	Stovall Co	oldwater Farms,	LLC		
If unavailable, the	alternate to be used in the s	tate of Florida is:			
2. The name and t	he Florida street address of	the registered agen	t and office are:		
_	Сар	oitol Corporate Se (Name)	ervices, Inc.		
_	155 Office Plaza Dr. Ste A Florida Street Address (P.O. Box NOT ACCEPTABLE)				
	Tallahassee	FL City/State/Zip	32301	T-I AM	manaca metare f
liability company a	d as registered agent and to It the place designated in thi Id agree to act in this capac	s certificate, I hereb	y accept the appointme	ted limited 55	Tariotae

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.

Gayle Windle, Asst. Secretary on behalf of Capitol Corporate Services, Inc. (Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

# Delaware

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#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "STOVALL COLDWATER FARMS, 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 THIRTIETH DAY OF SEPTEMBER, A.D.
2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "STOVALL COLDWATER FARMS, LLC" WAS FORMED ON THE TWENTY-FIFTH DAY OF SEPTEMBER, A.D. 2014.

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

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DATE: 09-30-14

AUTHENTACATION: 1742630