(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nan	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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ACCOUNT NO. : I2000000195 REFERENCE: 350284 4800671 AUTHORIZATION \$ 125.00 COST LIMIT : ORDER DATE: October 24, 2014 ORDER TIME : 11:33 AM ORDER NO. : 350284-005 CUSTOMER NO: 4800671 FOREIGN FILINGS NAME: WELD CCW, LLC XXXX QUALIFICATION (TYPE: LL) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY
XX PLAIN STAMPED COPY _____ CERTIFICATE OF GOOD STANDING CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

COVER LETTER

Division of Corporations SUBJECT: WELD CCW	/ 11 C		
SUBJECT: VVLLD CCVV		ed Liability Company	
			ansact Business in Florida," Certificate of y company to transact business in Florida
Please return all correspondence concern	ing this matter to the	e following:	
	N	lame of Person	
GOLDBEF	RG KOHN	LTD.	
	F	irm/Company	·····
55 E. MON	IROE ST	., STE. 3300	
.		Address	A
CHICAGO	,IL 60603		
	City/S	state and Zip Code	
jgallentine(@weldrac	ing.com	
E-r	nail address: (to be use	d for future annual report notific	ation)
For further information concerning this r	natter, please call:		
Name of Conta	ct Person	at () Area Code Da	ytime Telephone Number
MAILING ADDRESS:	STREI	ET ADDRESS:	
Division of Corporations	Divisio	n of Corporations	
Registration Section		ation Section	
P.O. Box 6327 Tallahassee, FL 32314		Building xecutive Center Circle	
rananasee, 1 D 52514		assee, FL 32301	
Enclosed is a check for the follow	ing amount:		
□ \$125.00 Filing Fee □ \$1	30.00 Filing Fee &	☐ \$155.00 Filing Fee & Certified Copy	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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:

WELD CCW, 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 "LLC.")
_{2.} DELAWARE 3.
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) 4. (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, P.S. to determine penalty liability)
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
(See sections 605.0904 & 605.0905, P.S. to determine penalty liability) 618 RIDGEWOOD AVENUE, HOLLY HILL, FL 32117
5. OTO RIBOLAVOOD AVEIVOL, MOLET MILE, TE 92117
(Street Address of Principal Office)
618 RIDGEWOOD AVENUE, HOLLY HILL, FL 32117
(Mailing Address)
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
JEFF GALLENTINE, MANAGER, 6600 STADIUM DRIVE, KANSAS CITY, MO 64129
JEFF GALLENTINE, MANAGER, 8000 STADIOM DRIVE, RANSAS CITT, MO 04129
NORMAN YOUNG, MANAGER, 6600 STADIUM DRIVE, KANSAS CITY, MO 64129
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)
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. It is a ware 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

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.

ii unavanao	le, the alternate to be used in the state	e of Florida is:	
			2014
2. The nam	e and the Florida street address of the	e registered agent and office are:	OCT 24
	Corporation Service Company		等等
	((Name)	107 OF 34
	1201 Hays Street		
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	
	Tallahassee	32301 FL	
	C	City/State/Zip	
liability com	pany at the place designated in this co gent and agree to act in this capacity.	cept service of process for the above sto ertificate, I hereby accept the appointm I further agree to comply with the prov rmance of my duties, and I am familiar	ent as visions of all with and
statutes rela	bligations of my position as registered	agem as provided for in Chapter 605,	Pioriaa

Designation of Registered Agent

Certificate of Status (optional)

Certified Copy (optional)

\$ 25.00

\$ 30.00

5.00

\$

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "WELD CCW, 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 TWENTY-FOURTH DAY OF OCTOBER, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "WELD CCW, LLC" WAS FORMED ON THE SEVENTEENTH DAY OF OCTOBER, A.D. 2014.

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

5623743 8300

141330745

Jeffrey W Bullock, Secretary of 1407HENTYCATION: 1807896

DATE: 10-24-14

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