Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA00000023 Phone : (850) 222-1092

Fax Number : (850)878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

Foreign Limited Liability Company ET Fort Myers, LLC

Certificate of Status	0
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Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help NOV 13,2014

	COVER LETTER
TO:	Registration Section Division of Corporations
SUBJ	ECT: ET FOA MY WS UC
The en	iclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Floride," Centificate of nee, and check are submitted to register the above referenced (breign limited liability company to transact business in Florida
Mense	raturn all correspondence concerning this matter to the libliowing:
	Stephanie Saw
	Name of Purson
	ElmTra Punds
	Firet/Company
	8027 Forsyth
	Address 1
	St. Louis, 40 63705
	SSAMO Elmtree funds. com
	E-mail subdrass: (to be used for future samual papers wettification)
For Au	ther information concerning this matter, please call:
	Stephanie Saw., 314, 828.4203
	Name of Contact Person Area Code Day time Tulephone Number
	MAILING ADDRESS: STREET ADDRESS: Division of Corporations Registration Section Registration Section P.D. Box 6327 Cliffon Building Tallahassee, FL 33314 2661 Executive Center Circle
	Tallahessee, FL 3230!
Enclos	sed is a check for the following amount: III \$ 1.25.00 Filing Fee

FILED 2014 NOV 12 PM 2: 17 SECRETARY OF STATE

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	TRANSACT BUSINESS IN PLORIDA
	LIANCE WITH SECTION 603,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A
FOREIGN	LIMITED LIABILITY COMPANY TO TRANS ICT BUSINESS IN THE STATE OF FLORIDA:
1	(None of Foreign Limited Liability Company; must include "Limited Liability Company;" L.L.C., "of "LLC.")
	(Nome of Foreign Limited Liability Company; must include "Limited Liability Company;" L.L.C.," of "LLC.")
(If name una	salloble, enter alternate name adopted for the purpose of transacting business in Flurida. The alternate mane must include "Limited apany." "L.L.C." or "L.C."
Patenti Cou	Apany, L.L.C., OF LLC. 1
2	on under the low of which foreign limited lipbility (FEI auniber, if applicable)
	on under the low of which foreign limited liability (FEI number, if applicable)
4	Date first transacted butiness in Florids, If grow to registration.)
	(Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability)
5.	8027 FOSV4h
	Ma 1-2 4- 62/25
	(lay tor, MD 05/03
	Vancet vancet of table onto
ნ	
	(Malling Address)
7. The na	me, title or capacity and address of the person(s) who has/have authority to manage is/are:
	James G. Koman, Manager
	8127 FORTH
	Clayton, NO 63105
,	
3. Attached	d is an original certificate of existence, no more than 90 days old, duly authenticated by the official
aving cus	stody of records in the jurisdiction under the law of which it is organized. (A photocopy is not
cceptable	. If the certificate is in a foreign language, a translation of the certificate under oath of the translator
nusi be su	bmitted)
	Ha L Marie Comment
	Signature of an authorized person
in presultance v	with secsion 605-0203. Fig. the execution of this discusses constitues on official under the penalties of perjury that the focus stated between are truey false information submitted in a discussion to the Department of State consultates a third degree falson, as provided for in a 817-155. F.S.)
un awarz troj ži	uk mine unnemantan inatuhkan ina dasantesa ta ma rekampan ni arma manantasa tuda debat mani) as lununca ini ma a i i, 1325 t. a.)
	James a. Koma
	Typed or printed name of signee



. .

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.01 13 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 Liabilit	y Company is:	.		
		ET 7014	Myes, LCC		
If unavailable,	, the alternate to be us	ed in the state of Florida is:			
2. The name a	and the Florida street s	address of the registered agent t	and office are:		
	C T Corporation System	កា			
	(Name)				
	1200 South Pine Island Road				
	Florida Street Address (P.O. Box NOT ACCEPTABLE)				
	Plantation	FL 33324			
		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 603, Florida Statutes.

By: CT Composition System Katherine Lackey, Assistant Secretary

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

STATE OF MISSOURI



Jason Kander Secretary of State

CORPORATION DIVISION
CERTIFICATE OF GOOD STANDING

I, JASON KANDER, Secretary of State of the STATE OF MISSOUR!, do hereby certify that the records in my office and in my care and custody reveal that

ET FORT MYERS, LLC LC001424545

was created under the laws of this State on the 6th day of November, 2014, and is active, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 12th day of November, 2014.

Secretary of State

Certification Number: CERT-11122014-0004

