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(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
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(Document Number)
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FLORIDA DEPARTMENT OF STATE Division of Corporations

October 6, 2014

JAMES HANCE 6 CHESLER SQUARE SUCCACUNNA, NJ 07876

SUBJECT: HANCE TRANSPORT, LLC

Ref. Number: W14000060742

RECEIVED

14 DEC -2 MI 10: 00

We have received your document for HANCE TRANSPORT, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

- ☼Please print name of company clearly in #1. Please print name of registered agent on "CERTIFICATE OF DESIGNATION OF REGISTERED AGENT" form. Registerd agent is not a title for a person authorized to manage the company.
- You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).
- 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.

Karen A Saly Regulatory Specialist II

Letter Number: 014A00021327

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Hance Transport LLC Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate 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:
James Hance Name of Person
Name of Person
Hance Transport uc
Firm/Company
Cochester Square Address Succa sunna NJ 07876 City/State and Zip Code
Address
Succasunna NJ 07876
City/State and Zip Code
a hance @ msn. com /+ Tds trans@ 5-mail address: (to be used for future animal report notification)
For further information conperning this matter, please call:
James Hance at (973) 945-3476 Name of Contact Person Area Code Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, PL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle
Tallahassee, FL 32301 Enclosed is a check for the following amount: \$125.00 Filing Fee \$\Bar{\text{Certificate}}\$ \$155.00 Filing Fee & \$\Bar{\text{Certificate}}\$ \$155.00 Filing Fee & \$\Bar{\text{Certificate}}\$ \$155.00 Filing Fee & \$\Bar{\text{Certificate}}\$ \$160.00 Filing Fee, Certificate 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 FORFIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. Harce Transport L.C. (Name of Foreign Limited Liability Company; must include "Limited Liability Company," 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. NJ 3. 22-375 4176 (Jurisdiction under the law of which foreign limited liability company is organized) 3. 22-375 4176 (FEI number, if applicable)
4. 10 1 2014 (Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability)
s. G. Chesler Square
Succasurna NJ 07876 (Street Address of Principal Office)
6. Same
(Mailing Address)
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
Constance Manager Constance Manager (registered agent)
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 605.0201 F.S., the execution of this document constitutes an affirmation under the penaltics of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree follow as provided for in a.817.155, F.S.) Tames Ware Ce Typed or printed name of signee

P.02

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 the Limited Liability Company is:	
Hance Transport 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:	
Constance Manas	でデ
PORT ST Lucie FL 34983-1280	2
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.

A Britane W saudo
(Signature)

\$ 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 NEW JERSEY DEPARTMENT OF THE TREASURY SHORT FORM STANDING

HANCE TRANSPORT L.L.C.

0400241663

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on July 21, 2008.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify the registered agent and registered office are:

James Hance 6 Chesler Square Succasunna, NJ 07876

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Certificate Number: 134218609

Verify this certificate online at

https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 17th day of November, 2014

Andrew P Sidamon-Eristoff
State Treasurer