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COVER LETTER

TO: Registration Section
Division of Corporations

PROVIDENCE PROCESS SOLUTIONS, LLC

SUBJECT:

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:

	Timothy	J. Conn	er Name of	Person					
	Conner E	Bosch L					 		
	4488 N. (Oceans	hore B						
	Palm Coa	ast, FL	Addr. 3213						
	tjconner@	ocblpa.	City/State and	l Zip Code			TAC:	2014	
For further info	rmation concerning th	E-mail address: (i		ture annual repo	ort notificatio	en)	LAHAS:	1 DEC 23	
Re	gina Gutie	errez	at (386	445-		Y OF		
,	Name of Co	ontact Person	•	Area Code	Daytin	ne Telephone Nu	mb E S S	ယ္	-
Divisi	LING ADDRESS: on of Corporations ration Section	· .	STREET AD Division of C Registration S	orporations			ATE VIBA	2	
	Box 6327 lassee, FL 32314		Clifton Buildi 2661 Executiv Tallahassee, F	ve Center Circ	le				
	a check for the follows: \$25.00 Filing Fee \(\sim \)	wing amoun \$130.00 Filing Certificate of S	Fee & 🗆 🕏	\$155.00 Filing Certified Copy		3 \$160.00 Filin of Status & €			

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:

PROVIDENCE PROCESS SOLUTIONS, 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 "L.C.")
2. State of Wisconsin 3. 45-5480872
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4. December 31, 2014
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 27 Cypress Wood Drive South
Palm Coast, FL 32137
(Street Address of Principal Office)
6. 2816 E. Robinson St. ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩
Orlando, FL 32803
(Mailing Address)
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
Vernon J. Spaulding, MGR.
2816 E. Robinson St.
Orlando, FL 32803
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 to 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.) Theorems T. Connect.
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 the Limited Liability Company is:

PROVIDENCE PROCESS SOLUTIONS, LLC

f 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:	10000000000000000000000000000000000000
Timothy J. Conner	SSEE OF THE PROPERTY OF THE PR
(Name)	Fig. is
4488 N. Oceanshore Blvd.	12 N
Florida Street Address (P.O. Box NOT ACCEPTABLE)	<u> </u>

PALM COAST FL 32137
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.

(Signature)

\$ 100.00 Filing Fee for Application\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

DOM 180 181 183

United States of America

State of Wisconsin



DEPARTMENT OF FINANCIAL INSTITUTIONS

To All to Whom These Presents Shall Come, Greeting:

I, GEORGE PETAK, Administrator, Division of Corporate and Consumer Services, Department of Financial Institutions do hereby certify that

PROVIDENCE PROCESS SOLUTIONS, LLC

is a domestic corporation or a domestic limited liability company organized under the laws of this state and that its date of incorporation or organization is March 20, 2006.

I further certify that said corporation or limited liability company has, within its most recently completed report year, filed an annual report required under ss. 180.1622, 180.1921, 181.1622 or 183.0120, Wis. Stats., and that it has not filed articles of dissolution.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on December 11, 2014.

GEORGE PETAK, Administrator Division of Corporate and Consumer Services Department of Financial Institutions

BY:

Effective July 1, 1996, the Department of Financial Institutions assumed the functions previously performed by the Corporations Division of the Secretary of State and is the successor custodian of corporate records formerly held by the Secretary of State.