## Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000080403 3)))



H150000804033ABCV

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : SHOMAKER, LOOP & KENDRICK LLP

Account Number : 075500004387 Phone : (813)229-7600 Fax Number : (813)229-1660

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

Email Address: wblgir@slk-law.com

### Foreign Limited Liability Company Condor Industries, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

#### 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 BU	ISINESS IN THE STATE OF FLORIDA:
Condor Industries, LLC	
(Name of Foreign Limited Liability Company; must include	"Diffired Diability Company," "L.E.C.," or "LL.C.")
(If name unavailable, enter alternate name adopted for the purpose of trans Liability Company," "L.L.C," or "LLC.")	acting business in Plorida. The electrate name must include "Limited
	26-3616839
(Jurisdiction under the law of which foreign limited liability company is organized)	(FBI number, if applicable)
4. 03/24/2015	F 5
(Date first transacted business in Flo (See sections 605,0904 & 605,0905, F.	ride, if prior to registration.) S. to determine penalty liability)
<sub>5.</sub> 4000 NE 10th Way	The state of the s
Pompano Beach, FL 33064	
(Street Address of	Principal Office)
<sub>6.</sub> 4000 NE 10th Way	<b>一部の</b>
Pompano Beach, FL 33064	
(Mailing )	(ddreas)
7. The name, title or capacity and address of the person	(s) who has/have authority to manage is/are:
Lee Smith, Controller	
4000 NE 10th Way	
Pompano Beach, FL 33064	
8. Attached is an original certificate of existence, no more having custody of records in the jurisdiction under the last acceptable. If the certificate is in a foreign language, a translate to submitted)  Signature of an alignment of signature of an alignment of signature of an an owner that any false information submitted in a document to the Department of Submitted C. Agreda  Juan C. Agreda	w of which it is organized. (A photocopy is not anslation of the certificate under oath of the translator anslation of the certificate under oath of the translator of the translator of person that the facts stated herein are true. It take constitutes a third degree (clony as provided for in £817.155, F.S.)
Typed or printed na	ime 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.

	the Limited Liability (ndustries, LL)		
If unavailable, t	he alternate to be used	in the state of Florida is:	
2. The name an	d the Florida street add	iress of the registered agent and office are;	STEP TO
	Willard A. Bl	air	S
		(Name)	
	101 East Ke	nnedy Blvd Suite 2800	1 1 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Florida Sne	cet Address (P.O. Box NOT ACCEPTABLE)	
	Tampa	FI. 33602	,
	***	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.

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

MAR-31-2015 16:24

H15000080403 3

#### Office of the Secretary of the State of Connecticut

1, the Connecticut Secretary of the State, and keeper of the seal thereof, DO HEREBY CERTIFY, that articles of organization for

#### CONDOR INDUSTRIES, LLC

a domestic limited liability company, were filed in this office on October 29, 2008.

Articles of dissolution have not been filed, and so far as indicated by the records of this office such limited liability company is in existence.

Secretary of the State

Date Issued: March 27, 2015

Business ID: 0953684

Standard

Certificate Number: 2015087250001

Note: To verify this certificate, visit the web site http://www.concord.sots.ct gov