4/21/2/5 / S9: 0 Planm: 10: 85061 383 / 1 / A Department of State Prisin of Corporation Florida Department of State Division of Corporations
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To: Division of Corporations Fax Number : (850)617-6383 From: Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023 Phone : (850)205-8842 Fax Number : (850)878-5368
<pre>**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.** Email Address:</pre>
Foreign Limited Liability Company Brown Industries, LLC
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4/21/2015 12:59:08 PM From: To: 8506176383( 2/5 ) 1

#### **COVER LETTER**

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TO: **Registration Section Division of Corporations** 

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**Brown Industries, 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:

Gary E. Lee		
	Name of Person	
Brown Industrie	s, LLC	
	Firm/Company	
807 E. 29th Stre	eet	
	Address	
Lawrence, KS	66049	
	City/State and Zip Code	
accounting@bc	vi.com	
E-mail address:	(to be used for future annual repo	ort notification)
For further information concerning this matter, plea	se call:	
Gary E. Lee	.,785	842-6506, x136
Name of Contact Person	Area Code	Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circ Tallahassee, FL 32301	Ic
Enclosed is a check for the following amou	int:	
🖻 \$125.00 Filing Fee 🛛 \$130.00 Filin		Fee & 🛛 \$160.00 Filing Fee. Certific

Certificate of Status

□ \$155.00 Filing Fee & Certified Copy

S160.00 Filing Fee. Certificate of Status & Certified Copy

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### 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:

1. Brown Industries, LLC

(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "L.L.C.," or "LLC.")

, Kansas	2	26-1600832
(Jurisdiction under the law of which foreign limited liability company is organized)		(FEI number, if applicable)
No business transacted in Flori	da	
(Date first transacted busines. (See sections 603.0904 & 605.0	in Flo 105, F.	nida, if prior to registration.) S. to determine penalty liability)
<u>807 E. 29th Street</u>		<u></u>
Lawrence, KS 66046		
<u>(Street Add</u>	ress of	Principal Office)
Lawrence, KS 66046		R. Q.
(M	ailing .	Address)
7. The name, title or capacity and address of the p	ersor	n(s) who has/have authority to manage is/are
David Price, CEO , 807 E. 29th Street,	Lawı	rence, KS 66046
W. Dane Jennison, President . 807	' E. 2	29th Street, Lawrence, KS 66046

Gary E. Lee, CFO, 807 E. 29th Street, Lawrence, KS 66046

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. I 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.\$17.155, F.S.)

Gary E. Lee

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:

Brown	Inc	lustr	ies.	L	L(	2
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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:

C T Corporati	on System	ALL IS T
	(Name)	APR
1200 South F	Pine Island Road	Par 2 F
Florida Stree	Address (P.O. Box NOT ACCEPTABLE)	719 <b>R</b>
Plantation,	FL <sup>33324</sup>	8: 2. FLOR
	City/State/Zip	- 3

-2

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

Torio Thing ree to Application

- **\$ 25.00** Designation of Registered Agent **\$ 30.00** Certified Copy (optional)
- \$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)
- \$ 5.00 Certificate of Status (optional)

Page 1 of 1

# STATE OF KANSAS OFFICE OF SECRETARY OF STATE KRIS W. KOBACH

I, KRIS W. KOBACH, Secretary of State of the state of Kansas, do hereby certify, that according to the records of this office.

Business Entity ID Number: 6220081

Entity Name: BROWN INDUSTRIES, LLC

Entity Type: DOM: LTD LIABILITY COMPANY

State of Organization: KS

Resident Agent: THE CORPORATION COMPANY, INC.

Registered Office: 112 SW 7TH STREET SUITE 3C, TOPEKA, KS 66603

was filed in this office on December 18, 2007, and is in good standing, having fully complied with all requirements of this office.

No information is available from this office regarding the financial condition, business activity or practices of this entity.



In testimony whereof I execute this certificate and affix the seal of the Secretary of State of the state of Kansas on this day of April 21, 2015

KRIS W. KOBACH SECRETARY OF STATE

Certificate ID: 658030 - To verify the validity of this certificate please visit <u>https://www.kansas.gov/bess/flow/validate</u> and enter the certificate ID number.