

MIS000003270

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

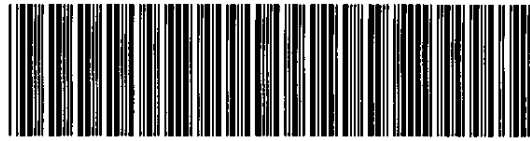
(Business Entity Name)

(Document Number)

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T SCHROEDER  
4.29.15

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Classic Venture Group LLC**

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:

**Brian Riley**

Name of Person

**Streetside Classics**

Firm/Company

**5400 W WT Harris Blvd**

Address

**Charlotte, NC 28269**

City/State and Zip Code

**brian.riley@streetsideclassics.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Brian Riley**

Name of Contact Person

at ( **618** ) **779-7751**

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 Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

- \$125.00 Filing Fee     \$130.00 Filing Fee & Certificate of Status     \$155.00 Filing Fee & Certified Copy     \$160.00 Filing Fee, Certificate of Status & Certified Copy

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

*IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A  
FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. Classic Venture Group LLC

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

Classic Venture Group-FL 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. North Carolina

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 26-2429049

(FEI number, if applicable)

4. N/A

(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 4610 Pet Lane

Lutz, FL 33559

(Street Address of Principal Office)

6. 5400 W WT Harris Blvd

Charlotte, NC 28269

(Mailing Address)

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REGISTRY OF STATE  
CORPORATION

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Donna Robbins, President, 140 Larkhaven Ln, Mooresville, NC

Robert Mueller, VP Sales, 19117 Dove Creek Dr, Tampa, FL

Brian Riley, VP Finance, 1975 Colonial St, Aurora, IL

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.817.155, F.S.)

Brian K Riley

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:

**Classic Venture Group LLC**

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If unavailable, the alternate to be used in the state of Florida is:

**Classic Venture Group-FL LLC**

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2. The name and the Florida street address of the registered agent and office are:

**Robert Mueller**

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(Name)

**19117 Dove Creek Dr**

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Florida Street Address (P.O. Box NOT ACCEPTABLE)

**Tampa**

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**33647**

FL  
City/State/Zip

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REGISTERED MAIL OF STATE  
FILED IN TAMPabay, FLORIDA

**FILED**

*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.*



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(Signature)

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



# NORTH CAROLINA

## Department of the Secretary of State

### CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

### CLASSIC VENTURE GROUP, LLC

is a limited liability company duly formed under the laws of the State of North Carolina, having been formed on the 22nd day of April, 2008, with its period of duration being Perpetual.

I FURTHER certify that the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act; and that the said limited liability company has not filed articles of dissolution as of this date of this certificate.



Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 6th day of April, 2015.

*Elaine F. Marshall*

Secretary of State