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SECRETARY OF STATE ALLAHASSEE, FLORIDA

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COVER LETTER

10;	-	on Section of Corporation	s					
	Sup	er Suds Ca	r Wash of Bart	ow, LLC				
SUBJI	ECT:		Name	of Limited Lia	ability Company			
			eign Limited Liabil	ity Company	for Authorizat	ion to T	ransact Business in Floridatity company to transact bus	
Please	return all co	rrespondence c	oncerning this matt	er to the foli	owing:			
	S	cott Briggs						
				Name	of Person	·		-
	S	uper Suds	Car Wash of B	artow, LL	С			
	_			Firm/C	Company			-
	7	33 Mast Ro	ad, Suite C					
				Ad	dress			-
	M	lanchester,	NH 03102					
				City/State a	and Zip Code			-
	so	cottbbriggs@	@yahoo.com					
			E-mail address: (o be used for	future annual rep	ort notif	ication)	
For fur	ther informa	tion concerning	this matter, please	call:				
Scott Briggs		at	603	391-	-2831			
	 	Name of	f Contact Person	a	Area Code)E	Daytime Telephone Number	_
	Division o Registration P.O. Box			Registration Clifton Buil	Corporations Section ding tive Center Circ	cle	I SI	<u>-</u> -
Enclo		eck for the fo Filing Fee	ollowing amoun \$\Boxed{\Boxed}\$ \$\\$130.00 \text{ Filing} Certificate of \$\text{S}\$	Fee & 🗆	\$155.00 Filing Certified Cop	-	\$160.00 Files Fee, of Status & SEE, FLOR	

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: Super Suds Car Wash of Bartow, 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 "LLC.") New Hampshire (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 733 Mast Road, Suite C Manchester, NH 03102 (Street Address of Principal Office) 733 Mast Road, Suite C Manchester, NH 03102 (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Scott Briggs, Manager, 733 Mast Road, Suite C, Manchester, NH 03102 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 constitutes are affirmation under the penalties of perjury that the constitutes are affirmation under the penalties of perjury that the constitutes are affirmation under the penalties of perjury that the constitutes are affirmation under the penalties of perjury that the constitutes are affirmation under the penalties of perjury that the constitutes are affirmation under the penalties of perjury that the constitutes are affirmation under the penalties of perjury that the constitutes are affirmation under the penalties of perjury that the constitutes are affirmation under the penalties of perjury that the constitutes are affirmation under the penalties of perjury that the constitutes are affirmation under the penalties of perjury that the constitutes are affirmation under the penalties of perjury that the constitutes are affirmation under the penalties of penalties of penalties are affirmation under the penalti n 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 Scott Briggs

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.

The name of the Limited Liability Company is: Super Suds Car Wash of Bartow, LLC						
If unavailable,	the alternate to be used in t	the state of Florida is:				
2. The name a	and the Florida street addres	ss of the registered agent and offi	ce are:			
	13127 Bridgeport Cros	(Name)				
	<i>,</i>	Address (P.O. Box NOT ACCEPTABLE)				
	Lakewood Ranch	34211 FL City/State/Zip				
liability compa registered ager statutes relatin accept the oblig	ny at the place designated ir nt and agree to act in this ca g to the proper and complet	nd to accept service of process for in this certificate, I hereby accept to apacity. I further agree to comply be performance of my duties, and I gistered agent as provided for in	the appointment as with the provisions of all I am familiar with and			
Statutes.	Ka Ka	gnature:	RECEIVEL 15 MAY -4 PM 1: SECRETARY OF ST FALLAHASSEE, FLO			

\$ 25.00 Designation of Registered Agent

Certificate of Status (optional)

\$ 30.00 Certified Copy (optional)

5.00

State of New Hampshire Department of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that Supersuds Car Wash of Bartow, LLC is a New Hampshire limited liability company filed on April 14, 2015. I further certify that it is in good standing as far as this office is concerned, having paid the fees required by law; and that a certificate of cancellation has not been filed.

THE THE PARTY OF T

In TESTIMONY WHEREOF, I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 14th day of April, A.D. 2015

William M. Gardner Secretary of State