# M 15000003589

| (Requestor's Name)                      |
|---|
|   |
| (Address)                               |
|   |
| (Address)                               |
|   |
| (City/State/Zip/Phone #)                |
|   |
| PICK-UP WAIT MAIL                       |
|   |
| (Business Entity Name)                  |
|   |
| (Document Number)                       |
|   |
| Certified Copies Certificates of Status |
| · ——                                    |
|   |
| Special Instructions to Filing Officer: |
|   |
|   |
|   |
|   |
|   |
|   |
|   |

Office Use Only



300271355623

2015 NAY -8 AN 9: 42
SECKETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED 15 MAY -8 AM ID: 47

ILVISION OF CORPORATIONS

N. Cuttigen MAY 1 1 2015

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

| ACCOUNT | NO. | : | 120000000195 |
|---------|-----|---|--------------|
|---------|-----|---|--------------|

REFERENCE: 620000 4339596

AUTHORIZATION : Symbolic man

COST LIMIT : \$125

ORDER DATE: May 6, 2015

ORDER TIME : 5:50 PM

ORDER NO. : 620000-035

CUSTOMER NO: 4339596

#### FOREIGN FILINGS

NAME: FORSYTH COLORADO LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Troy Todd -- EXT# 62940

EXAMINER:

### COVER LETTER

| TO: Registration Section Division of Corporations  |  |  |  |  |  |
|--|--|--|--|--|--|
| SUBJECT: Forsyth Colorado 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:  |  |  |  |  |  |
| Hunter Powell  |  |  |  |  |  |
| Name of Person   |  |  |  |  |  |
| Forsyth Capital  |  |  |  |  |  |
| Firm/Company   |  |  |  |  |  |
| 8040 Forsyth Blvd.   |  |  |  |  |  |
| Address  |  |  |  |  |  |
| St. Louis, MO 63105  |  |  |  |  |  |
| City/State and Zip Code  |  |  |  |  |  |
| hunter.powell@forsythcapital.com   |  |  |  |  |  |
| E-mail address: (to be used for future annual report notification)   |  |  |  |  |  |
| For further information concerning this matter, please call:   |  |  |  |  |  |
| Hunter Powell 314 863-6640   |  |  |  |  |  |
| 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 Circle  Tallahassee, FL 32301                           |  |  |  |  |  |
| Enclosed is a check for the following amount:  \$\Begin{array}{c} \Begin{array}{c} \Sigma 125.00 \text{ Filing Fee} \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \   |  |  |  |  |  |

## 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 Forsyth Colorado 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.")  |
| <sub>2.</sub> Missouri <sub>3.</sub> 47-3713508  |
| (Jurisdiction under the law of which foreign limited liability company is organized)  (FEI number, if applicable)  |
| 4. (Date first transacted business in Florida, if prior to registration.)  |
| (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)   |
| 5. 8040 Forsyth Blvd., St. Louis, MO 63105   |
| 5. CO40 TOTAY IT DIVER, OIL LOUIS, WIC CO TO   |
| (Street Address of Principal Office)   |
| 6 8040 Forsyth Blvd., St. Louis, MO 63105 \$\frac{\text{\tint{\text{\tint{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\te}\tint{\texi{\text{\texi{\texi{\texi{\texi}\text{\text{\texi{\text{\texi{\text{\texi}\text{\texi}\texit{\text{\tex{ |
| ي الم  |
| (Mailing Address)  |
| (Walting Address)  |
| 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:   |
| See attached   |
|  |
|  |
|  |
|  |
| 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.)   |
| William Kyle Chapman, President  |
| Typed or printed name of signee  |

#### Forsyth Colorado LLC, a Missouri limited liability company

Alaska
Florida
Kentucky
Maine
Massachusetts
Montana
Nevada
New Mexico
South Carolina
South Dakota
Texas
West Virginia
Wyoming



#### Name and address of the Managers:

| Managers             | Address                                 |  |
|----------------------|---|--|
| William Kyle Chapman | 8040 Forsyth Blvd., St. Louis, MO 63105 |  |
| Ryan L. Gable        | 8040 Forsyth Blvd., St. Louis, MO 63105 |  |
| John Quinn           | 8040 Forsyth Blvd., St. Louis, MO 63105 |  |
| Patrick McLaughlin   | 8040 Forsyth Blvd., St. Louis, MO 63105 |  |

# 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 Forsyth Colora | of the Limited Liability<br>do LLC | Company is:                                    |           |
|----------------------------|------------------------------------|--|-----------|
| If unavailable,            | , the alternate to be used         | d in the state of Florida is:                  |           |
| 2. The name a              | and the Florida street ac          | ddress of the registered agent and office are: | SEC SEC   |
|                            | Corporation Service C              | ompany   | 調賞工       |
|                            |                                    | (Name)   | ASSE & LE |
|                            | 1201 Hays Street                   |  | FOR E     |
|                            | 9.                                 |  |           |
|                            | Tallahassee                        | 32301<br>FL                                    | Dri X     |
|                            |                                    | 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.

Corporation Service Company

By:

(Signature)

Troy Todd
as its agent

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

STATE OF MISSOUR



## Jason Kander Secretary of State

CORPORATION DIVISION CERTIFICATE OF GOOD STANDING

I, JASON KANDER, Secretary of State of the STATE OF MISSOURI, do hereby certify that the records in my office and in my care and custody reveal that

Forsyth Colorado LLC LC001441792

was created under the laws of this State on the 1st day of April, 2015, and is active, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 7th day of May, 2015.

Secretary of State

Certification Number: CERT-05072015-0058