

M15000 03880

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

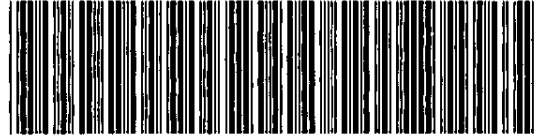
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: NATIVE AMERICAN WHOLESALE SUPPLY 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:

GREGORY ABRAMS

Name of Person

NATIVE AMERICAN WHOLESALE SUPPLY LLC

Firm/Company

14460 FALLS OF NEUSE RD, SUITE 149-334

Address

RALEIGH NC 27614

City/State and Zip Code

NATIVEAMERICANWHOLESALE@GMAIL.COM

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

For further information concerning this matter, please call:

GREGORY ABRAMS

Name of Contact Person

at ( 919 ) 339-2044

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. NATIVE AMERICAN WHOLESALE SUPPLY 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.")

2. NORTH CAROLINA 3. 46-4474084  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

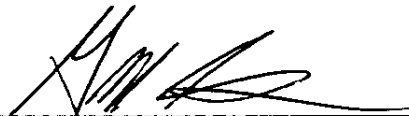
4. ONCE APPROVED  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. NATIVE AMERICAN WHOLESALE SUPPLY LLC, 14460 FALLS OF NEWSE RD,  
SUITE 149-334, RALEIGH, NC 27614  
(Street Address of Principal Office)

6. SAME AS ABOVE  
(Mailing Address)

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:  
GREGORY ABRAMS, MANAGER  
12432 ONEAL RD, WAKEFORD NC 27587

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.)

GREGORY ABRAMS

Typed or printed name of signee



# Department of the Secretary of State

## CERTIFICATE OF EXISTENCE (Limited Liability Company)

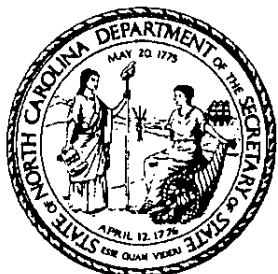
I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

### NATIVE AMERICAN WHOLESALE SUPPLY, LLC

is a limited liability company duly formed under the laws of the State of North Carolina, having been formed on the 8th day of January, 2014, 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.

RECEIVED  
15 MAY 12 AM 8:11  
SECRETARY OF STATE  
NORTH CAROLINA



Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 1st day of May, 2015.

*Elaine F. Marshall*

Secretary of State