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SECREWAY OF STATE
FAILAMASSEE FLORIDA

SECRETARY OF STATE OF OLD STATE

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COVER LETTER

TO;	Registration Section Division of Corporations
SUBJE	Avik Services, LCC
	Name of Limited Liability Company
	closed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of ice, 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: Andrea Freiwald
	Name of Person
	Avik Services Firm/Company
	Firm/Company
	PO BOX 689
	Mt. Pleasant, 5c 29465
	Mt. Pleasant, Sc 29465 City/State and Zip Code afreivalde avikservices.com
	E-mail address: (to be used for future annual report notification)
For fur	ther information concerning this matter, please call:
	And sea Freiwald at (612) 743.8203 Name of Contact Person Area Code Daytime Telephone Number
	Name of Contact Person Area Code Daytime Telephone Number
	MAILING ADDRESS: STREET ADDRESS: Division of Corporations Division of Corporations
	Registration Section Registration Section
	P.O. Box 6327 Clifton Building
	Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301
Enclo	sed is a check for the following amount:
	S125.00 Filing Fee S130.00 Filing Fee & S155.00 Filing Fee & S160.00 Filing Fee, Certificate Certificate of Status Certified Copy of Status & Certified Copy

SECRETARY OF STATE
IT VISION OF CUSTURATION

15 MAY 22 PM 2: 19

SECRETARY OF STATE
FALLAHASSEE, FLORIDA

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. Avik Services, (C) (Name of Foreign Limited Liability Company: must include "Limited Liability Company." "L.L.C.," or "L.C.,")
(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. Missouri 3. 45-4957955 (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.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 4306 Rider Trail N Bldg F Earth City, MO 63045 (Street Address of Principal Office)
6. PO BOX 689 Mount Pleasant, SC 29465 (Mailling Address)
(Mailing Address)
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
Andrea Freiwald, CFO
1580 Landings Run Mt. Pleasant, 5c 29464
Mt. Pleasant, SC 29464
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 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.)
ANDREA FREINALD
Typed or printed name of signee

15 MAY 22 PM 2: 20

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.

If unavailable, the alternate to be used in the state of Florida is:				
2. The name	and the Florida street add	lress of the registered agent and office are:		
	NRAI Services, Inc.			
		(Name)		
	1200 South Pine Island R	ond		
	Florida Stro	et Address (P.O. Box NOT ACCEPTABLE)		
	Plantation	FL 33324		

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.

NRAI Services, Inc.

By:

Kimberly Steinmetz
Vice President & Assistant Secretary
(Signature)

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

TECRE PARY OF STATE SECRETARY 22 PH 2: 20

SECRETARY OF STATE SECRETARY.

STATE OF MISSOURI



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

AVIK SERVICES, L.L.C. LC1217681

was created under the laws of this State on the 3rd day of April, 2012, 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 19th day of May, 2015.

Secretary of State

Certification Number: CERT-05192015-0022

