

#M15000005295

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(Address)

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☐ PICK-UP

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Special Instructions to Filing Officer:

W15-43065 misspell

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2015 JUL -6 PM 3:21

FILED

K. SALY  
EXAMINER  
JUL -7 2015



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

15 JUL -6 PM 2: 57

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

June 23, 2015

ERIC CHAPPELL  
3130 SUNSET COVE  
NEW BRAUNFELS, TX 78130

SUBJECT: FLTEX USA ALLERFGY SOLUTIONS LLC  
Ref. Number: W15000043065

We have received your document for FLTEX USA ALLERFGY SOLUTIONS LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity must be identical throughout the document.

It appears the filing submitted has a typographical error in the entity name. Please verify this name and all other information contained in the filing and resubmit it for processing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly  
Regulatory Specialist II

Letter Number: 415A00013177

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** FLTEX USA Allergy Solutions 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:

Eric Chappell

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Firm/Company

3130 Sunset Cove

\_\_\_\_\_  
Address

New Braunfels, Texas 78130

\_\_\_\_\_  
City/State and Zip Code

eric.c.chappell@gmail.com

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

For further information concerning this matter, please call:

Eric Chappell

254

432-1144

at ( )

\_\_\_\_\_  
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:

☐ \$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 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. FLTEX USA Allergy Solutions 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. Texas Office of Secretary Of State 3. 47-3836621  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 05/18/2015  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. \_\_\_\_\_  
3130 Sunset Cove  
(Street Address of Principal Office)

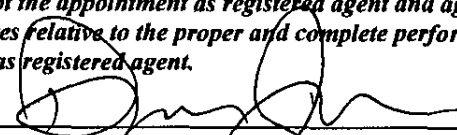
6. New Braunfels TX 78130  
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: David Jones  
Office Address: 217 Citrus Trail  
Boynton Beach, Florida 33436  
(City) (Zip code)

**Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

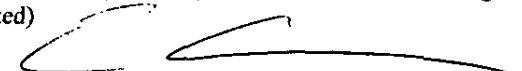
  
(Registered agent's signature)

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

Eric Chappell- Managing Member 3130 Sunset Cove New Braunfels TX 78130

David Jones- Managing Member 217 Citrus Trail Boynton Beach FL 33436

9. Attached is a 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. (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.)

Eric Chappell  
Typed or printed name of signee

FILED  
2015 JUL -6 PM 3:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Corporations Section  
P.O.Box 13697  
Austin, Texas 78711-3697



Carlos H. Cascos  
Secretary of State

## Office of the Secretary of State

### CERTIFICATE OF FILING OF

FLTEX USA Allergy Solutions LLC  
File Number: 802201283

FILED  
2015 JUL -6 PM 3:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned, as Secretary of State of Texas, hereby certifies that a Certificate of Formation for the above named Domestic Limited Liability Company (LLC) has been received in this office and has been found to conform to the applicable provisions of law.

ACCORDINGLY, the undersigned, as Secretary of State, and by virtue of the authority vested in the secretary by law, hereby issues this certificate evidencing filing effective on the date shown below.

The issuance of this certificate does not authorize the use of a name in this state in violation of the rights of another under the federal Trademark Act of 1946, the Texas trademark law, the Assumed Business or Professional Name Act, or the common law.

Dated: 04/23/2015

Effective: 04/23/2015



A handwritten signature in black ink, appearing to read "Cascos", followed by a horizontal line.

Carlos H. Cascos  
Secretary of State