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COVER LETTER

TO: Registration Section Division of Corporations

SUNDANCE ROOFING AND LLC EXTERIORS SUBJECT: 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:

MARCUS SHAWN ROOFING AND EXTERIORS SUNDANCE Firm/Company 1631 FEDERAL HWY. Address 506 City/State and Zip Code <u>MYSUNDANCERESTORATION @ GMAIL . COM</u> E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARCUS SHAWN PFENNINGER at (754) 800 - 5551 Name of Contact Person Area Code Daytime Telephone Number

MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

STREET ADDRESS:

Registration Section

Division of Corporations

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. SUNDANCE ROOFING AND EXTERIORS, LLC	
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LL	C.")
SUNDANCE RESTORATION, LLC	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name m	ust include "Limited
Liability Company," "L.L.C," or "LLC.")	
2. <u>INDIANA</u> (Jurisdiction under the law of which foreign limited liability 3. <u>ZG - 2894493</u> (FEI number, if applicable)	
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)	
$_{4}$ N/A	
OLD (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) NEW (Antipathetermine penalty liability)	(AFTER FL. REG.)
5. 4730 APPLE SPRUCE PR. 1631 S. FEDERAL HWY., STE	, 506
<u>INDIANAPOLIS, IN 46235</u> (Street Address of Principal Office)	
6. 1631 S. FED. HWY., STE. 506	
POMPANO BCH. FL. 33062 (Mailing Address)	- '
 (Mailing Address) 	
7. Name and street address of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)	
Name: MARCUS SHAWN PFENNINGER	
Office Address: 1631 S. FEDERAL HWY, STE, 506	
Name: <u>MARCUS SHAWN PFENNINGER</u> Office Address: <u>1631 S. FEDERAL HWY. STE.506</u> <u>Pompano BCH., FL 33062</u> , Florida <u>33062</u> (City) (Zip code)	in the second se
	- ,

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 agen s signature)

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

ANITA PFG	NNINGER ;	CO-OWNER	
1631 S.F.	EDERAL HW	Y., STE. 506	
_	BCH. FL:		

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

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Typed or printed name of signe

STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greetings:

I, Connie Lawson, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

SUNDANCE ROOFING AND EXTERIORS, LLC

duly filed the requisite documents to commence business activities under the laws of State of Indiana on August 13, 2013, and was in existence or authorized to transact business in the State of Indiana on July 20, 2015.

I further certify this Domestic Limited Liability Company (LLC) has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Twentieth Day of July, 2015.

Corrie a amoon

Connie Lawson, Secretary of State

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