M50000677

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	ry/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
		į		

Office Use Only



500275601975

08/07/15--01007--022 **130.00

TITED

AUG 10 2015 S. YOUNG

COVER LETTER

Registration Section

TO:

Division of Corporati	lóns			
SUBJECT: Triden	t Enterprises	LIC		
	Name of	Limited Liability Company		
The enclosed "Application by F Existence, and check are submit				
Please return all correspondence	e concerning this matter to the	following:		
_G	arrett Fifer	lame of Person		
To	ident Enterp	erises LLC		
	La Brisa	Reach Cir	cle	
M_0	ary Esther F	State and Zip Code		国高工
	in to @ emba E-mail address: (to be use	ssyemeralds.c.	o ∕∕(ification)	题 20
For further information concern				934 5
Garrett	r of Contact Person	at (<u>850</u>) <u>46</u>	time Telephone Numb	er
MAILING ADDRESS Division of Corporation Registration Section P.O. Box 6327 Tallahassee, FL 32314		Division Registrat Clifton B 2661 Exc	of Corporations ion Section uilding centive Center Circle see, FL 32301	
Enclosed is a check for the follo □ \$125.00 Filing Fee	wing amount: \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filing Fee & Certified Copy	□ \$160.00 Filing Fer of Status & Certified	•

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. Trident Enterprises LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "L	
	LC.")
Florida Trident Enterprises LLC (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name thiability Company," "L.L.C." or "LLC.")	must include "Limited
2. Dolaware (Jurisdiction under the law of which foreign limited liability company is organized) 3. 16-174267 (FEI number, if applicable)	
4. I APR 25 (5 (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
5. 14 La Brisa Beach Circle	
Mary Esther FL 32569 (Street Address of Principal Office) 6. 14 La Brisa Beach Circle	ma â
Mary Esther Fl 32569 (Mailing Address)	
7. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)	
Name: <u>Carrett</u> F. fer	
Office Address: 14 La Brisa Beach Circle Mary Esther Florida 32569 (Circ) (Zincode)	
Mary Esther Florida 32569	and the same of
Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I fur with the provisions of all statutes relative to the proper and complete performance of my duties, and I am for the obligations of my position as registered agent.	ther agree to comply
(Registered agent's signature)	
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:	
Garrett Fifer, Director	
14 La Brisa Beach Circle	
Mary Esther, FL 32569	
9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having cus jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the 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 fa submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.15	

E. F.C.
Typed or printed name of signee

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THAT "TRIDENT ENTERPRISES LLC" IS

DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN

GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN

CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS OFFICE SHOW

AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

THE FOLLOWING DOCUMENTS HAVE BEEN FILED:

CERTIFICATE OF FORMATION, FILED THE FOURTEENTH DAY OF NOVEMBER, A.D. 2005, AT 11:07 O'CLOCK A.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CERTIFICATES ON RECORD OF THE AFORESAID LIMITED LIABILITY COMPANY, "TRIDENT ENTERPRISES LLC".

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

4060180 8310

150604723

AUTHENTY CATION: 2373465

DATE: 05-13-15

You may verify this certificate online at corp.delaware.gov/authver.shtml