

MISOUUUU 7095

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

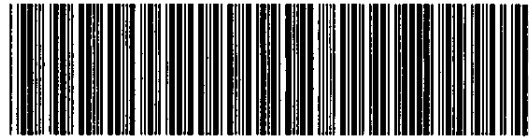
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2015 SEP -4 P 1:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SEP 08 2015

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Applegate Fifer Pulliam

Angi Brodfuehrer
abrodfuehrer@afpfirm.com

August 31, 2015

Florida Department of State
Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee FL 32314

RE: Brookstone Financial, LLC

Dear Sir/Madam:

The law office of Applegate Fifer Pulliam LLC represents Brookstone Financial, LLC. Enclosed are the following:

1. Cover Letter
2. Application by Foreign LLC for Authorization to Transact Business in Florida
3. Certificate of Existence issued by the Indiana Secretary of State
4. Our check in the amount of \$125 for the filing fee

Please process this application at your earliest convenience. Should you have any questions or concerns, please do not hesitate to contact me.

Sincerely,

Angi Brodfuehrer
Paralegal

/amb

Enclosure: As stated

cc: client

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: BROOKSTONE FINANCIAL, 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:

SETH B. STEWART

Name of Person

BROOKSTONE FINANCIAL, LLC

Firm/Company

702 NORTH SHORE DRIVE, SUITE 102

Address

JEFFERSONVILLE IN 47130

City/State and Zip Code

sstewart@brookstonefinancial.com

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

For further information concerning this matter, please call:

SETH B. STEWART

502

550-6518

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. BROOKSTONE FINANCIAL, 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. INDIANA 3. _____
(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. 702 NORTH SHORE DRIVE, SUITE 102

JEFFERSONVILLE IN 47130
(Street Address of Principal Office)

6. 702 NORTH SHORE DRIVE, SUITE 102

JEFFERSONVILLE IN 47130
(Mailing Address)

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

Name: JAMES M. JONES

Office Address: 29036 MAGNOLIA LANE

BIG PINE KEY, Florida 33043
(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:

JAMES M. JONES, MEMBER

SETH B. STEWART, MEMBER

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.

SETH B. STEWART

Typed or printed name of signee

FILED
2015 SEP - 4 P 1:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

To Whom These Presents Come, Greetings:

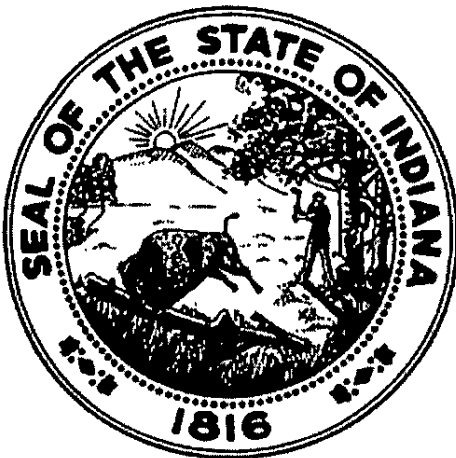
I, Connie Lawson, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

BROOKSTONE FINANCIAL, LLC

duly filed the requisite documents to commence business activities under the laws of State of Indiana on June 02, 2003, and was in existence or authorized to transact business in the State of Indiana on August 31, 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 Thirty-First Day of August, 2015.

Connie Lawson

Connie Lawson, Secretary of State

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