

M15000007404

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

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Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2015 SEP 16 P 3:29

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SEP 17 2015
J. BRUCE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 28, 2015

WILLIAM C. MCCLEAN III
7939 GOLFHOUSE DRIVE
HOBE SOUND, FL 33455

SUBJECT: TROPICS CONSULTING, LLC
Ref. Number: W15000044637

We have received your document for TROPICS CONSULTING, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please accept our apology for failing to mention this in our previous letter.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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.

Deborah Bruce
Regulatory Specialist II

Letter Number: 515A00016858

2015 SEP 16 P 3:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

TROPICS CONSULTING, LLC
7939 Golfhouse Drive
Hobe Sound, FL 33455

July 21, 2015

Division of Corporations
Registration Section
PO Box 6327
Tallahassee, FL 32314
Attn: Deborah Bruce

RE: Tropics Consulting, LLC
Ref.#: W15000044637

Dear Ms. Bruce,

Enclosed is the corrected registration form which list William C. McClean III as the manager and is the person who has the authority to manage the LLC. Also enclosed are the Delaware corporation and good standing documents.

If additional information or documents are required, please contact me at (212) 729-8174.

I thank you in advance for your immediate attention to this matter.

Sincerely,

William C. McClean III

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Tropics Consulting, 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:

William C. McClean III
Name of Person

Tropics Consulting, LLC
Firm/Company

7939 Golfhouse Drive
Address

Hobe Sound, FL 33455
City/State and Zip Code

chmmclee@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

William C. McClean III at (772) 546-6149
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:

Tropics Consulting, 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.")

1. Delaware

(Jurisdiction under the law of which foreign limited liability
company is organized)

3. 47-3590771

(FEI number, if applicable)

4.

N/A No business transacted in Florida.

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

5.

7939 Golfhouse Drive

Hobe Sound, FL 33455

(Street Address of Principal Office)

6.

7939 Golfhouse Drive

Hobe Sound, FL 33455

(Mailing Address)

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

Name:

William C. McClean III

Office Address:

7939 Golfhouse Drive

Hobe Sound, FL

, Florida 33455

(City)

(Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company 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.

William C. McClean III

(Registered agent's signature)

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

William C. McClean III 7939 Golfhouse Drive Hobe Sound, FL 33455 Manager

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.)

William C. McClean III

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.

William C. McClean III

Typed or printed name of signer

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TALLAHASSEE
FLORIDA
SECRETARY OF STATE

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TROPICS CONSULTING, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FIRST DAY OF JULY, A.D. 2015.

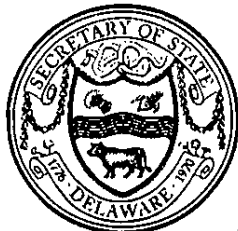
AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TROPICS CONSULTING, LLC" WAS FORMED ON THE FIRST DAY OF APRIL, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5721219 8300

151074892

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




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 2575318

DATE: 07-21-15