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(Requestor's Name)	
(Address)	
(Address)	800276490398
(City/State/Zip/Phone #)	000276490396 M15 - 7407
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(Business Entity Name)	. ^
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COVER LETTER

TO: Registration Section Division of Corporations	
Marjac Solutions, LLC SUBJECT:	
Name of Limited L	iability Company
The enclosed "Application by Foreign Limited Liability Company for A Existence, and check are submitted to register the above referenced foreign."	
Please return all correspondence concerning this matter to the following	Ç
ATTN: Denise Thompson, Paralegal	
Name of Person	
Bingham Greenebaum Doll LLP	
Firm/Company	
2700 Market Tower, 10 West Market Street	,
Address	
Indianapolis, IN 46204	
City/State and Zip Code	
2700market@bgdlegal.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Denise Thompson 317 at (635-8900
· · · · · · · · · · · · · · · · · ·	ca 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: \$\Begin{align*} \Pi \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	.00 Filing Fee & S 160.00 Filing Fee, Certificate of Status & Certified Copy

Denise M. Thompson

Paralegal Direct: 317-968-5427 | Fax: 317-236-9907

Direct: 317-968-5427 | Fax: 317-236-9907 Email: dmthompson@bgdlegal.com



September 3, 2015

Privileged & Confidential

Florida Secretary of State Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Re: Application for Certificate of Authority Marjac Solutions, LLC

Dear Secretary:

Enclosed for filing are one (1) original and one (1) copy of an Application for Certificate of Authority for Marjac Solutions, LLC organized in the state of Indiana.

Also enclosed is our firm's check in the amount required as payment of the filing fee for the enclosed application for registration.

I have enclosed a self-addressed envelope for your convenience in returning the authorization to me. Thank you for your attention to this matter.

Please do not hesitate to contact me directly at the telephone number listed above, if you have any questions regarding this request.

Thank you for your assistance.

Sincerely,

Denise M. Thompson

Perily M. Thompson

Paralegal

Enclosures

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: Marjac Solutions, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company;" "L.L.C.," or "L.L.C.") (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 (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) Upon registration (Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 14181 South Tamiami Trail, Suite 140 Fort Myers, FL 33912 (Street Address of Principal Office) Same as principal address listed above. (Mailing Address) 7. Name and street address of Florida registered agent. (P.O. Box NOT acceptable) Jay E Highley Name: 14181 South Tamiami Trail, Suite 140 Office Address: Fort Myers (City) 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 agod. 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Matthew T. Troyer, Member and Manager, 13446 Dilot Lane, McCordsville, IN. 46055 Jay E Highley, Member and Manager, 124 Primo Drive, Ft. Myers Beach, FL 33931 Matthew M. Green, Member and Manager 13515 Marjac Way, McCordsville, IN 46055 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. Matthew T. Troyer, Member and Manager Typed or printed name of signee

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

15 SEP O 4 AM 8: 34
SECRETARY OF STATE
FALL AHASSEE, FLORID

To Whom These Presents Come, Greetings:

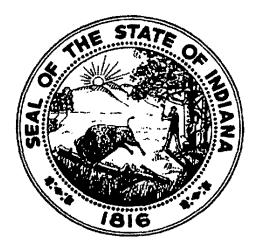
I, Connie Lawson, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

MARJAC SOLUTIONS, LLC

duly filed the requisite documents to commence business activities under the laws of State of Indiana on August 13, 2015, and was in existence or authorized to transact business in the State of Indiana on September 03, 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 Third Day of September, 2015.

Colrie Carre

Connie Lawson, Secretary of State

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