

W1500000795

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

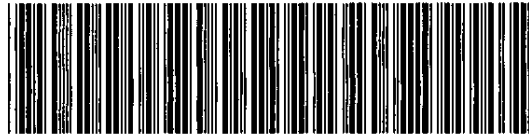
(Document Number)

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Special Instructions to Filing Officer:

W15-58178

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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OCT 07 2015  
J. BRUCE



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 2, 2015

TODD FITZ  
8029 RAVINE RUN LANE  
COLUMBUS, OH 43235

SUBJECT: ROSES TKS, LLC  
Ref. Number: W15000058178

We have received your document for ROSES TKS, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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: 615A00018526

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TALLAHASSEE, FLORIDA  
OCT 6 PM 2:25

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COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: ROSES TKS, 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:

TOOD FITZ

Name of Person

GULF COAST SUNGLASSES

Firm/Company

8029 RAINE RUN LANE

Address

COLUMBUS, OHIO 43235

City/State and Zip Code

GULF COAST SUNGLASSES @ GMAIL.COM

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

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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For further information concerning this matter, please call:

TOOD FITZ

Name of Contact Person

at ( 941 )

Area Code

786-8332

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. ROSES TKS 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. OHIO 3. 26-2625253  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. NOT PRIOR TO REGISTRATION  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 8029 RAINE RUN LANE  
COLUMBUS, OHIO 43235  
(Street Address of Principal Office)

6. 8029 RAVINE RUN LANE  
COLUMBUS, OHIO 43235  
(Mailing Address)

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

Name: TODD FITZ

Office Address: 4177 TAMiami TRAIL SOUTH  
VENICE, Florida 34293  
(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.

[Signature]  
(Registered agent's signature)

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

Kim FITZ 8029 RAINE RUN DRIVE COLUMBUS, OH 43235 PRESIDENT  
TODD FITZ 8029 RAINE RUN DRIVE COLUMBUS, OH 43235 MANAGING 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]  
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.

TODD FITZ  
Typed or printed name of signee

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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UNITED STATES OF AMERICA  
STATE OF OHIO  
OFFICE OF THE SECRETARY OF STATE

*I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show ROSES TKS, LLC, an Ohio Limited Liability Company, Registration Number 1665389, was organized within the State of Ohio on December 8, 2006, is currently in FULL FORCE AND EFFECT upon the records of this office.*



*Witness my hand and the seal of the  
Secretary of State at Columbus, Ohio  
this 1st day of October, A.D. 2015.*

*Jon Husted*

Ohio Secretary of State

Validation Number: 201527401686