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SECRETARY OF STATE ALLAHASSEE. FLORIO

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Law Offices of Donald R. Schoonover 4211 Rolling Hills Drive Nixa, Missouri 65714

e-mail: patentstms@aol.com

Telephone (417) 724-2188

September 30, 2015

Division of Corporations Registration Section P. O. Box 6327 Tallahassee, Florida 32314

Re: Tril

Tribal Diamonds, LLC

TO: Registration Section

Division of Corporations

Enclosed herewith are completed and executed documents for my client, Tribal Diamonds, LLC, a Missouri limited liability company, as follows:

- Cover Letter;
- Application by foreign limited liability company for authorization to transact business in Florida; and
- Check No. 3948 in the sum of \$125.00 for the fees.

Also enclosed herewith is a copy of the Certificate of Organization showing Tribal Diamonds LLC (Charter No. LC001460977) was registered by the State of Missouri less than a month ago, on September 10, 2015. My client has not yet conducted any business; please advise if a Certificate of Good Standing is also required. If so, it will be promptly provided.

If you have any questions or need any other information, please do not hesitate to contact me. Thank you for your assistance in this matter.

Sincerely,

Oonald R. Schoonover

Enclosure

COVER LETTER

TO:

Registration Section

Division of Corporations	\$			
SUBJECT:Tribal Diamo	onds, LLC	Limited Liability	Company	
The enclosed "Application by Fore Existence, and check are submitted	rign Limited Liability Comp to register the above refere	any for Authorizanced foreign limi	ation to Tra ted liability	ansact Business in Florida," Certificate of y company to transact business in Florida
Please return all correspondence co	oncerning this matter to the	following:		
Sh	nawna Thompson			
		me of Person		
M	latrix Accounting and	Tax rm/Company		
	L	m/Company		
3(00 S Jefferson, Ste	401		
M	ov o deligion, ore-	Address		
S	Springfield, MO 6580)6		
,	City/St	ate and Zip Code		
	shawna@matrixacco	untingandta	x.com	
	E-mail address: (to be used	for future annua	report not	ification)
For further information concerning	this matter, please call:			
Shawna Thompso		_at (_417		4179
Name of	Contact Person	Area Code	Day	time Telephone Number
MAILING ADDRESS: Division of Corporations				ADDRESS:
Registration Section				of Corporations on Section
P.O. Box 6327			Clifton B	uilding
Tallahassee, FL 32314				cutive Center Circle ee, FL 32301
Enclosed is a check for the following		*** ** * * * * *		— •••••
\$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	S155.00 Filit Certified Copy	ig Fcc &	☐ \$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 POLLOWING IS SUBMITTED TO REGISTER A FOR COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	IDIGN LIMITED LIABILITY	
1. Tribal Diamonds LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LL.C.," or "LL	C.17)	
(If name unsvallable, enter elternate name adopted for the purpose of transacting business in Florida. The elternate name m Liability Company," "L.L.C," or "L.L.C," or	ust include "Limited	
2. Missouri 3		
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)		
4. 10-1-15		
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)		
5. 300 S Jefferson, Ste 401, Springfield MO 65806		
(Street Address of Principal Office)	₩ 2	
6. 300 S Jefferson, Ste 401 Springfield MO 65806	2015 SEC	
	S OCT	1
(Mailing Address)	TAR ASS	, and
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	SERY 2	, r
See her Toc	[[유 ʊ	ا س
Name: Incorp OF VIUS, III.	i_;o,	C
Office Address: 17888 6747 Court North	II A	
Loxahatchee , Florida 33470	A S	
(City) (Zip code) Registered agent's acceptance:	N.	
Having been named as registered agent and to accept service of process for the above stated limited liability		
designated in this application, I hereby accept the appointment as registered agent and agree to act in this co to complywith the provisions of all statutes relative to the proper and complete performance of my duties, an		
accept the obligations of my position as resistand agent. Chaptered agent's signature)		
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/sre: Shawna Thompson, Member, 300 S Jefferson, Ste 401 Springfield MO 658	06	
Stacey Johnson, Member, 300 S Jefferson, Ste 401 Springfield MO 65806		
9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having cust 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) Shawna Thompson	ody of records in the certificate under cath	
Signature of an authorized person		
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any fall submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155	e information , F.S.	
Shawna Thompson		
Typed or printed name of signee		

STATE OF MISSOURI



Jason Kander Secretary of State

CORPORATION DIVISION
CERTIFICATE OF GOOD STANDING

I, JASON KANDER, Secretary of State of the STATE OF MISSOURI, do hereby certify that the records in my office and in my care and custody reveal that

Tribal Diamonds LLC LC001460977

was created under the laws of this State on the 11th day of September, 2015, and is active, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 8th day of October, 2015.

Secretary of State

Certification Number: CERT-10082015-0038

