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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OCT 16 2015
J SHIVER

COVER LETTER

**TO: Registration Section
Division of Corporations,**

SUBJECT: FOUR PEAKS ENTERPRISES, 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:

JOHN MORTON

Name of Person

FOUR PEAKS ENTERPRISES, LLC

Firm/Company

28150 N ALMA SCHOOL PARKWAY, SUITE 201

Address

SCOTTSDALE, AZ 85262

City/State and Zip Code

jmorton@4peaksglobal.com

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

For further information concerning this matter, please call:

COLLEEN CZAPLICKI

623 444-5239

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. FOUR PEAKS ENTERPRISES, 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. IOWA

3. 90-0784028

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

(FEI number, if applicable)

4. OCTOBER 1, 2012

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

5. 28150 N ALMA SCHOOL PARKWAY, SUITE 201

SCOTTSDALE, AZ 85262

(Street Address of Principal Office)

6. SAME AS ABOVE

(Mailing Address)

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

Name: ROBERT ARENELLA

Office Address: 7025 INDUSTRIAL RD

W. MELBOURNE

(City)

Florida 32904

(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.

Robert Arenella

(Registered agent's signature)

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

JOHN MORTON, PRESIDENT - 28150 N ALMA SCHOOL PKWY, STE 201, SCOTTSDALE, AZ 85262

COLLEEN CZAPLICKI, Bookkeeper - 28150 N ALMA SCHOOL PKWY, STE 201, SCOTTSDALE, AZ 85262

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.

JOHN C. MORTON, PRESIDENT/OWNER

Typed or printed name of signee

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TALLAHASSEE, FLORIDA

**IOWA SECRETARY OF STATE
PAUL D. PATE**



CERTIFICATE OF EXISTENCE

Date: 9/21/2015

Name: FOUR PEAKS ENTERPRISES, LLC (489DLC - 427785)

Date of Incorporation: 12/12/2011

Duration: PERPETUAL

I, Paul D. Pate, Secretary of State of the State of Iowa, custodian of the records of incorporations, certify the following for the limited liability company named on this certificate:

- a. The entity is in existence and duly incorporated under the laws of Iowa.
- b. All fees, taxes and penalties required under the Revised Uniform Limited Liability Company Act and other laws due the Secretary of State have been paid.
- c. The most recent biennial report required has been filed with the Secretary of State.
- d. The Secretary of State has not administratively dissolved the limited liability company.
- e. The Secretary of State has not filed either a statement of dissolution or statement of termination.

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JALAHASSEE, FLORIDA

Certificate ID: CS112566

To validate certificates visit:
sos.iowa.gov/ValidateCertificate

A handwritten signature of Paul D. Pate in black ink.
Paul D. Pate, Iowa Secretary of State