

Division of Corporations

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M15000264066

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850)617-6383

RE-SUBMIT

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850)205-8842
Fax Number : (850)878-5368

Please retain original filing date of submission 11/4

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**Foreign Limited Liability Company
Kemco Systems Co., LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03 8
Estimated Charge	\$125.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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S. YOUNG

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Help

11/6/2015 3:19:41 PM From: To: 8506176383(2/8)
850-817-6381 11/5/2015 8:12:28 AM PAGE 1/002 Fax Server

November 5, 2015

CT CORPORATION

SUBJECT: KEMCO SYSTEMS CO., LLC
REF: W15000072990

RE-SUBMIT

Please retain original filing
date of submission 11/4

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a foreign limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form. You must also attach a copy of the written consent of the managers or managing members adopting the alternate name for Florida. You may download a fill-in-the-blank written consent form from our website www.sunbiz.org.

The alternate name must end with the words Limited Liability Company, the abbreviation "L.L.C.", or the designation "LLC". The word "Limited" may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable limited liability company suffixes in Florida: Limited Company, L.C., and LC.

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.

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Neysa Culligan
Regulatory Specialist II

FAX Aud. #: H15000264066
Letter Number: 715A00023402

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11/6/2015 3:19:41 PM From: To: 8506176383(6/8)



KEMCO SYSTEMS, INC.

11500 47TH STREET NORTH, CLEARWATER, FL 33762 USA

November 6, 2015

Florida Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Re: Consent to Use of Name – Kemco Systems

Dear Sir or Madam:

The undersigned, as Secretary of Kemco Systems, Inc., a Florida corporation, document number K45199 (the "Company"), hereby states the following on behalf of the Company:

The Company consents to the use of the name "Kemco Systems Co., LLC" by Kemco Systems Co., LLC, a Delaware limited liability company, which is submitting an Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida with the Florida Department of State, Division of Corporations along with this consent.

KEMCO SYSTEMS, INC.

By: 

Richard T. Ruffi



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. KEMCO SYSTEMS CO., 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. DELAWARE 3. 47-5439055
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

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

5. 11500 47TH STREET NORTH
CLEARWATER, FL 33767
(Street Address of Principal Office)

6. 11500 47TH STREET NORTH
CLEARWATER, FL 33767
(Mailing Address)

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

Name: CT Corporation System
Office Address: 1200 South Pine Island Road
Plantation, Florida 33324
(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.

Rebecca Barth Rebecca Barth, Assistant Secretary
(Registered agent's signature)

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

CARROLL GORRELL, MANAGER

11500 47TH STREET NORTH

CLEARWATER, FL 33762

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.

CARROLL GORRELL

Typed or printed name of signee

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TALLAHASSEE, FLORIDA

Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "KEMCO SYSTEMS CO., 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 FOURTH DAY OF NOVEMBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN
PAID TO DATE.


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TALLAHASSEE, FLORIDA



5820322 8300

SR# 20150773069

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


Jeffrey W. Bullock, Secretary of State

Authentication: 10358956

Date: 11-04-15