

M/5000009984

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

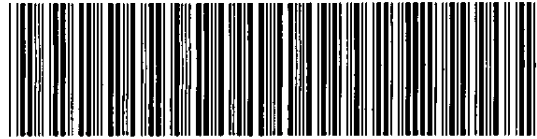
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DEPARTMENT OF STATE
15 DEC 21 PM 4:35
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2015 DEC 21 A 11:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC 22 2015
BRUCE

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 921273 7838690
AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 25.00

ORDER DATE : December 21, 2015
ORDER TIME : 3:10 PM
ORDER NO. : 921273-005
CUSTOMER NO: 7838690

FOREIGN FILINGS

NAME: NILFISK FLORIDA, LLC

☐ CORPORATE
☐ LIMITED PARTNERSHIP
☒ LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2015 DEC 21 A 11:52

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **Nilfisk Florida, LLC**

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Gidalthy Rodriguez

Name of Person

DLA Piper LLP (US)

Firm/Company

200 South Biscayne Boulevard, Suite 2500

Address

Miami, FL 33131-5341

City/State and Zip Code

Diane.Lapp@nilfisk.com

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

For further information concerning this matter, please call:

Diane Lapp

Name of Person

at (**763**) **745-3735**

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

CR2E062 (9/15)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2015 DEC 21 A 11: 52

FILED

**STATEMENT OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document.

FIRST: The name of the limited liability company is: Nilfisk Florida, LLC

SECOND: The Florida Document number of the limited liability company is: M15000009984

THIRD: Document to be corrected is: Application by Foreign LLC for Authorization to Transact Business in Florida

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)

- ☐ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

In error the original document included a comma in the name.

The name of the Limited Liability Company should be:

Nilfisk Florida LLC

OR

- ☐ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

OR

- ☐ The electronic transmission of the record was defective.

/s/ Jeff Barna

Signature of Authorized Representative

12/18/2015

Date

Signature of new registered agent, if applicable : (NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation).

New Registered Agent's Signature, if changing Registered Agent:

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 as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Registered Agent's Signature

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)