

(Requ	uestor's Name)	
(Addr	ess)	
	ess)	
·	·	
(City/	State/Zip/Phone	e #)
(0.0).		,
PICK-UP	MAIT	MAIL
•		
(Busi	ness Entity Nar	ne)
(Docu	ıment Number)	
Certified Copies	Certificates	s of Status
	<del></del>	
Special Instructions to Fi	ling Officer:	
		]
		ļ
		ļ





300280121903

01/04/16--01013--004 \*\*125.00

ZONG JAN -- U P II II

KECKETARY OF STATE

JAN 0 5 2016

**S MASON** 



209 Capitol Street Charleston, WV 25301 Tel: 304.345.6555 Fax: 304.342.1110

Linda E. Sadler, Paralegal Isadler@baileyglasser.com

December 31, 2015

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

Re: Advantage Technology LLC and Aridea LLC

Dear Sir or Madam:

Enclosed for your handling are completed Applications to qualify Advantage Technology LLC and Aridea LLC to do business in the State of Florida, along with this firm's check Nos. 53986 and 53987 in the amount of \$125.00 each as payment of filing fees for each entity. Also enclosed are copies of each form along with self-addressed, stamped envelopes, to return file-stamped copies to me.

If you have any questions or need anything else, please feel free to contact me.

Thanks very much for your assistance.

Sincerely,

Linda E Sadler

Paralegal

/s Enclosures

### **COVER LETTER**

	ation Section n of Corporations
SUBJECT:	Aridea LLC
OBJECT:	Name of Limited Liability Company
	pplication by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certific heck are submitted to register the above referenced foreign limited liability company to transact business in Fl
lease return all	correspondence concerning this matter to the following:
	Richard S. Wilbur, III
	Name of Person
-	Aridea LLC
	Firm/Company
	814 Quarrier Street
	· Address
	Charleston, WV 25301
	City/State and Zip Code
	rwilbur@advantagetech.biz
-	E-mail address: (to be used for future annual report notification)
or further inform	nation concerning this matter, please call:
	Karen Parsons 304 345-6555
	Name of Contact Person Area Code Daytime Telephone Number
Division Registra P.O. Bo	NG ADDRESS:  n of Corporations  ation Section  ox 6327  ssee, FL 32314  STREET ADDRESS:  Division of Corporations  Registration Section  Clifton Building  2661 Executive Center Circle  Tallahassee, FL 32301
	cck for the following amount:  .00 Filing Fee

## ÁPPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS

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: Aridea 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.") West Virginia (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) Upon qualification (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 360 Central Avenue - Suite 1500 St. Petersburg, FL 33701 (Street Address of Principal Office) 360 Central Avenue - Suite 1500 St. Petersburg, FL 33701 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Bailey & Glasser, LLP Name: 360 Central Avenue - Suite 1500 Office Address: St. Petersburg Florida (City) 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 complywith 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. 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Richard S. Wilbur, III, authorized person 814 Quarrier Street Charleston, WV 25301 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 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.

Richard S. Wilbur, III

Typed or printed name of signee



# I, Natalie E. Tennant, Secretary of State of the State of West Virginia, hereby certify that

#### ARIDEA LLC

made application to the West Virginia Secretary of State's Office to be a registered limited liability company in the State of West Virginia on June 18, 2014. The application was received and found to conform to law.

The company is filed as a term company, for the term ending.

I further certify that the company's most recent annual report, as required by West Virginia Code §31B-2-211, has been filed with our office and that a Certificate of Termination has not been issued.

Accordingly, I hereby issue this

### **CERTIFICATE OF EXISTENCE**

Validation ID:6WV5A\_A4HCB



Given under my hand and the Great Seal of the State of West Virginia on this day of January 05, 2016

Maleul E Jennant

Secretary of State