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TALLAHASSEE, FLORIDA

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FEB 19 2016

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 20, 2016

SHERRY HENDERSON
MCKNIGHT ENTERPRISE LLC
P.O. BOX 234, 133 E 9TH ST.
HUNTINGTON STATION, NY 11746

SUBJECT: MCKNIGHT ENTERPRISE LLC
Ref. Number: W16000003795

We have received your document for MCKNIGHT ENTERPRISE LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Karen A Saly
Regulatory Specialist II

Letter Number: 816A00001222

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: McKnight Enterprise 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:

Sherry Henderson
Name of Person

McKnight Enterprise LLC
Firm/Company

P.O. Box 234, 133 E 9th Street
Address

Huntington Station NY 11746
City/State and Zip Code

mcknightplow@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Vanessa Henderson at (631) 445-1364
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. McKnight Enterprise 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. Suffolk NY 3. 49-5128921
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 11/11/16
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 133 E 9th Street Huntington Station NY 11746
(Street Address of Principal Office)

6. P.O. Box 234 Huntington Station NY 11746
(Mailing Address)

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

Name: Vanessa Henderson
Office Address: 5344 S Robert Blake Ave
Inverness, Florida 34452
(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.

Vanessa Henderson
(Registered agent's signature)

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

Sherry Henderson - member owner
P.O. Box 234 Huntington Sta NY 11746

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)

Sherry Henderson
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.

Sherry Henderson
Typed or printed name of signee

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CLERK OF STATE
TREASURY OF FLORIDA

State of New York
Department of State } ss:

I hereby certify, that MCKNIGHT ENTERPRISE LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 09/23/2015, and that the Limited Liability Company is existing so far as shown by the records of the Department.

WITNESS my hand and the official seal
of the Department of State at the City of
Albany, this 27th day of January two
thousand and sixteen.

Anthony Giardina

Executive Deputy Secretary of State