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* SULKER

W16-7106

COVER LETTER

TO:

Registration Section Division of Corporations

Le SUBJECT:	enzie Fisher Hendry LLC	
SUBJECT	Name of Limited Liability Company	
Existence, and c	Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," C check are submitted to register the above referenced foreign limited liability company to transact business.	
Please return all	Il correspondence concerning this matter to the following:	
	Robert H. Singletary	
	Name of Person	
	Lenzie Fisher Hendry LLC	
	Firm/Company	
	152 Lake Mariam Road	
	Address	
	Winter Haven, Florida, 33884	
	City/State and Zip Code	
	RHS@Lenzie.org	
	E-mail address: (to be used for future annual report notification)	
For further infor	rmation concerning this matter, please call:	
Georgi	tia Fisher 863 324-3236 at ()	
	Name of Contact Person at () Name of Contact Person Area Code Daytime Telephone Number	
Divisio Registr P.O. Bo	LING ADDRESS: on of Corporations ration Section Box 6327 Box 6327 Box 6327 Box 6327 Clifton Building Box 63214 Clifton Building Clifton Buildi	
	heck for the following amount: 5.00 Filing Fee \$ \$\square\$ \$\$130.00 Filing Fee & \$\square\$ \$\$155.00 Filing Fee & \$\square\$ \$\$160.00 Filing Fee, Cert of Status & Certified Copy	ificate

in the state of



February 3, 2016

ROBERT H SINGLETARY 152 LAKE MARIAM ROAD WINTER HAVEN, FL 33884

SUBJECT: LENZIE FISHER HENDRY LLC

Ref. Number: W16000007706

We have received your document for LENZIE FISHER HENDRY LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

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.

Yasemin Y Sulker Regulatory Specialist II

Letter Number: 616A00002313

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTIIORIZATION 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:

	eign Limited Liability Company; must include '	'Limited Liability Company," "L.L.C.," o	or "LLC.")		
√a 					
iability Company," "L.L.C,	Iternate name adopted for the purpose of transac," or "LLC.")	cting business in Florida. The alternate na	ame must i	nclude '	"Limited
North Carolina	3			··	
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable	e)		
Not yet		·			
·	(Date first transacted business in Floric (See sections 605.0904 & 605.0905, F.S.	da, if prior to registration.)			
152 Lake Mariam Roa	•	to determine penanty nationally			
132 Lake Wallam Koa			_		
Winter Haven Florida					
	(Street Address of Principal O	office)			
152 Lake Mariam Road	1				
Winter Haven Florida 3	33884			111	
	(Mailing Address)		- 5		
Name and street address	ss of Florida registered agent: (P.O. Box 1	•	26.5 23.5	ο̈́,	; -,
. Hame and <u>street addres</u>	Robert H. Singletary	401_acceptable)		P	
Name:	Robert H. Singletary	<u> </u>		င်း	A CHARLES
Office Address:	152 Lake Mariam Road			20	
	Winter Haven	, Florida 33884 (Zip code)	30		
	(City)	(Zip code)			
	gistered agent and to accept service of pro tion, I hereby accept the appointment as r lone of all statutes relative to the proper an		his capac	ity. I f	urther a
o complywith the provision country the obligations of the country	(Registered agent) (Registered agent) acity and address of the person(s) who has/	•		_	
o complywith the provision country the obligations of the country	(Registered agent) (Registered agent) acity and address of the person(s) who has/	•		_	
o complywith the provision of the complywith obligations of the control of the co	(Registered agent) (Registered agent) acity and address of the person(s) who has/l	•			

to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Robert H. Singletary

Typed or printed name of signee



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE(Limited Liability Company)

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

LENZIE FISHER HENDRY LLC

is a limited liability company duly formed under the laws of the State of North Carolina, having been formed on the 26th day of March, 2002, with its period of duration being Perpetual.

I FURTHER certify that the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act; and that the said limited liability company has not filed articles of dissolution as of this date of this certificate.





Scan to verify online.

of Raleigh, this 20th day of January, 2016.

Claime 4. Marshall

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City

Secretary of State

Certification# 97910824-1 Reference# 12885254- Page: I of I Verify this certificate online at http://www.sos.nc.gov/verification