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(Re	equestor's Name)				
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(Document Number)					
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THE MAR 31 AND 5
SECRETARY OF STATE
OF STATE



March 11, 2016

ROBERT NAWROCKI 508 DELAWARE AVENUE WEST PITTSTON, PA 18643

SUBJECT: NAWROCKI IMPORTS LLC

Ref. Number: W16000018494

We have received your document for NAWROCKI IMPORTS LLC and your check(s) totaling \$125.00. 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.

Shelia H Young Regulatory Specialist II

Letter Number: 416A00005102

### **COVER LETTER**

TO:	Registration Section Division of Corporation	ons				
SUBJI	ECT:	Nawrocki Imports LLC	<u> </u>		`	
		Name of	f Limited Liability	Company		_
		oreign Limited Liability Con ted to register the above refe				
Please	return all correspondence	concerning this matter to the	e following:			
		Robert Nawro	cki			
		N	Name of Person			_
		Nawrocki Imp	ports LLC			40 6
		I	Firm/Company			图 图 图
508 Delaware Ave.			三 m			
		West Pittston, F	Address PA 18643			所の200mm <b>第 5 5</b>
			State and Zip Code	:		
		3				
	sales	@nawrockiimports.com E-mail address: (to be use	ed for future annua	l report no	tification)	
For fur	ther information concerni	ng this matter, please call:		•	·	
	Lindsey A. Zal		at (202	_)	9-3739 ext. 4	
	Name	of Contact Person	Area Code	Day	time Telephone Number	
	MAILING ADDRESS Division of Corporation Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division Registrat Clifton B 2661 Exe	of Corporations ion Section duilding ecutive Center Circle see, FL 32301	
Enclose	ed is a check for the follow \$\square \frac{1}{2}\$ \$125.00 Filing Fee	wing amount:  \$\Boxed{\Pi}\$ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filin Certified Copy		☐ \$160.00 Filing Fee, of Status & Certified C	

### 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:

Nawrocki Imports     (Name of Forei	LLC gn Limited Liability Company; must incl	ude "Limited Liability Com	pany," "L.L.C.," or "LL	C.'")	
(If name unavailable, enter alte Liability Company," "L.L.C,"	ernate name adopted for the purpose of tr	ansacting business in Florida	a. The alternate name m	ust include "Limit	.ed
<ol><li>Pennsylvania</li></ol>	3	46-4222226			
(Jurisdiction under the law of company is organized)	f which foreign limited liability	(FEI nu	mber, if applicable)	<del></del>	
4. N/A					
T	(Date first transacted business in [ (See sections 605.0904 & 605.0905,	Forida, if prior to registration	n.)		
5. 508 Delaware Av	•	1.5. to doternine penalty in	,	ದ್ಯ 🛨	
West Pittston, P	A 18643 (Street Address of Princip	a) Office)			, 1
6. 850 Homestead	•	an Onice;		SSS 2	
		· · · · · · · · · · · · · · · · · · ·			
Dallas, PA 18612	(Mailing Addres	se)			į L. K
7. No 1	•				
7. Name and street address	of Florida registered agent: (P.O. Bo	ox <u>NOT</u> acceptable)		>>'`` □	>
Name:	REGISTERED AGENTS INC.	<del></del>			
Office Address:	3030 N. Rocky Point Drive	, STE 150A			
	TAMPA	, Florida	33607		
Registered agent's accepta	(City)	, riorda	(Zip code)		
Having been named as reg this application, I hereby a	istered agent and to accept service of ccept the appointment as registered of atutes relative to the proper and com	agent and agree to act in	this capacity. I furth duties, and I am fan	ier agree to con uiliar with and d	iply iccept
-	(Registered a	gent's signature)		_	
8. The name, title or capac Robert Nawrocki, Fo	ity and address of the person(s) who lounder and CEO	has/have authority to man	age is/are:		
50% Dela	wate Ave.				
uest oi	HStn. PA 18643			<del></del>	
9. Attached is a certificate of purisdiction under the law of of the translator must be sub-	f existence, no more than 90 days old which it is organized. (If the certific	, duly authenticated by thate is in a foreign languag	e official having custo e, a translation of the	ody of records in certificate under	the roath
-	Signature of an	authorized person			
This document is executed i submitted in a document to t	n accordance with section 605.0203 ( he Department of State constitutes a t	1) (b). Florida Statutes 1:	am aware that any fals vided for in s.817.155	e information, F.S.	
_	Robert Nawr				
	Typed or printed	name of signee			

## COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE 02/25/2016

### TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

### NAWROCKI IMPORTS LLC

is duly registered as a Pennsylvania Limited Liability Company under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.

SECRETARY OF STARS

IN TESTIMONY WHEREOF, I have hereunto set; my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written

Pedro C. Contés

Secretary of the Commonwealth

Certification Number: TSC160225140999-1

Verify this certificate online at http://www.corporations.pa.gov/orders/verify.aspx