

## Florida Department of State Division of Corporations **Electronic Filing Cover Sheet**

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Division of Corporations

Fax Number : (850)617-6383

To:

Yvonne mendez From: : GRAY ROBINSON, P.A. Account Name Account Number : 075154001651 Phone : (321)727-8100 : (321)984-4122 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

**Foreign Limited Liability Company** 2016 MARZ SRI Connector Gage, LLC Certificate of Status 0 Certified Copy 0 03 υ Page Count S \$125.00 Estimated Charge ••• APR 0 7 2016

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March 31, 2016

FLORIDA DEPARTMENT OF STATE Division of Corporations

GRAY RABINSON, PA

SUBJECT: SRI CONNECTOR GAGE, LLC REF: W16000023762

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

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.

Yasamin Y Sulker Regulatory Specialist II FAX Aud. #: H16000079123 Letter Number: 816A00006561

please retain March 31, 2016 filing date

P.O BOX 6327 - Tallahassee, Florida 32314

## No. 0492 P 3

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## 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:

SRI Connector Gage, LLC 1

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

, 59-3410413

(If name unavailable, only 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 Delaware

	(Jurisdiction under the law of which foreign limited liability company is organized)		(FEI number, if applicable)			
4.	<u></u>					
		(Date first transacted business in Flori (See sections 605.0904 & 605.0905, F.S.	da, if prior to registration.) to determine penalty liability)		2	
5.	3950 Dow Road			73	2016	-
	Melbourne, FL 32934			IIAS	MARZI	11
	····	(Street Address of Principal O	office)	- Sin	مر	<b></b>
6.	3950 Dow Road			<u></u>	-	
	Melbourne, FL 32934			F STA	Ū —	D
		(Mailing Address)			Ň	
7.	Name and street address of Florida registered agent: (P.O. Box NOT acceptable)					
	Name;	James L. Twombly				σ.
	Office Address:	3950 Dow Road				
		Melbourne	., Florida <sup>32934</sup>			
		(City)	(Zip cod	e)		

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.

(Registered agent's signature)

8. The name, title or capacity and address of the person(6) who has/have authority to manage is/are;

James L. Twombly, Manager, 3950 Dow Road, Melbourne, FL 32934

Thomas Drago, Manager, 3950 Dow Road, Melbourne, FL 32934

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, P.S.

James L, Twombly

Typed or printed name of signes

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Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SRI CONNECTOR GAGE, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTIETH DAY OF MARCH, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.



Authentication: 202064785 Date: 03-30-16

6002153 8300 SR# 20161961125

You may verify this certificate online at corp.delaware.gov/authver.shtml