M140000003487

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

Office Use Only



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J. HARRIS

COVER LETTER

TO: Registratio Division of			•.			•		
SUBJECT: 5	\$ &	i L	L		615-5-115-15-7			
				Name o	f Limited Liability (ompany		
							nsact Business in Florida," Certificate of company to transact business in Florida	
Please return all corre	esponden	ice concer	ning this	matter to th	ne following:			
		MAI	(5	<u>4 M</u>	DE Name of Person	JYA	TIN	
			5,	<u> </u>	Firm/Company	_		
_	49	N	EI	DERA	Address	W 4	* # 338 <u></u>	
POMPANO BEACH, FL 33062 City/State and Zip Code								
	EK	OR 7 E-m	77 ail addre	ss: (to be us	SMAIL . C	COM report noti	fication)	
For further information								
MAK	-541 Nar	1 D	E VY act Pers	みてi ル on	at (720 Area Code		ime Telephone Number	
MAILING Division of Registration P.O. Box 63 Tallahassee.	Corporat Section 27	ions				Division of Registration Clifton Bu 2661 Exec	ADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301	
Enclosed is a check t □ \$125.00		e □\$		iling Fee & f Status	□ \$155.00 Filir Certified Copy	ng Fee &	\$160.00 Filing Fee, Certificate of Status & Certified Copy	



April 6, 2016

MAKSYM DEVYATIN 49 N FEDERAL HWY #338 POMPANO BEACH, FL 33068

SUBJECT: S & I LLC

Ref. Number: W16000025397



We have received your document for S & I 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):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

The document number of the name conflict is L01000018177.

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

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.

Jenna D Harris Regulatory Specialist II

Letter Number: 916A00007021

IN FLORIDA	IRINDIRGI BOURILDO
IN COMPLIANCE WITH SECTION 605D902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	FOREIGN LIMITED LIABILITY
s & i LLC	
(Name of Foreign Limited Liability Company; must include "Limited Liability Company." "L.L.C.," or	"LLC.")
NATIONAL FLAT RATE MOVERS LL	<u>C</u>
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate nar Liability Company," "L.L.C," or "L.L.C,")	ne must include "Limited
2. CO (Jurisdiction under the law of which foreign limited liability company is organized) 3. 861072279 (FEI number, if applicable)
4. (Date first transacted business in Florida, if prior to registration.)	_
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
5	
12794 E ASBURY CIR # 15-302E (Street Address of Principal Office)	76 PR 3
6. AURORA, CO 80014	The Co
	- 11
(Mailing Address)	- 20 🔊 💟
	- 2: 41 - 2: 41
7. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)	
Name: MAKSYM DEUYATIN	
Office Address: 49 N FEDERAL HWY#338	
POMPANO BEACH, Florida 33062) <u> </u>
(City) (Zip code)	=
Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated limited liab.	ility company at the place
designated in this application, I hereby accept the appointment as registered agent and agree to act in th	is capacity. I further agree
to complywith the provisions of all statutes relative to the proper and complete performance of my duties accept the obligations of my position as registered agent.	i, and I am familiar with and
O I December 1	
(Registered agent's signature)	_
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:	
MAKSYM DEVYATIN (MGR)	
49 N FEDERAL HWY#338	
POMPANO BEACH, FL 33062	
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 translator must be submitted)	
ll de la company	
Signature of an authorized person	_
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that an	y 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.
MAKSYM DEUYATIN	_
Typed or printed name of signee	

OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

I, Wayne W. Williams, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

S & I, LLC DBA Annaray Transport

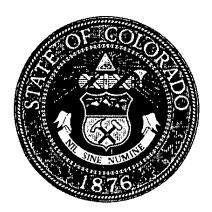
is a

Limited Liability Company

formed or registered on 05/28/2003 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20031171081.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 04/18/2016 that have been posted, and by documents delivered to this office electronically through 04/20/2016 @ 11:29:10 .

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 04/20/2016 @ 11:29:10 in accordance with applicable law. This certificate is assigned Confirmation Number 9609913



Williams.

Secretary of State of the State of Colorado

***************End of Certificate************

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, http://www.wov.state.co.us/biz/CertificateSearchCriteria.do/entering/the/certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, http:// www.vox.state.co.us/click/"Businesses, trademarks, trade names" and select "Frequently Asked Questions"