## m16000003846

(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:  Cer-J. W1U-30898						

Office Use Only



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FILED

MISHEY 12 P 2: 05

MISHEY 12 P 3: 05

MAY 1 3 2016

SWIPPEREN



April 26, 2016

CHRIS COOK 101 S. GARLAND AVENUE, SUITE 108 ORLANDO, FL 32801

SUBJECT: DISTRX LLC Ref. Number: W16000030898

We have received your document for DISTRX 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):

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.

Stacey M Warren Regulatory Specialist II

Letter Number: 216A00008656

## **COVER LETTER**

	gistration Section vision of Corporatio							
SUBJECT:	Distrx LLC							
000,001.		Name of Limited Liability Company						
					ansact Business in Florida," Coy y company to transact busines			
Please return	n all correspondence	concerning this matter to the	following:					
	Chris Cook							
		N	ame of Person					
	Distrx LLC							
		F	irm/Company					
	101 S. Garland Ave Suite 108							
			Address					
	Orlando, FL 32	2801						
		City/S	tate and Zip Code					
	chris@distrx.com	n						
		E-mail address: (to be use	d for future annual	report not	tification)			
For further i	information concernir	ng this matter, please call:						
Chris Cook		407 at (	358-4956					
	Name	of Contact Person	Area Code	Day	rtime 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						
	a check for the follow \$125.00 Filing Fee	ving amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	ng l'ee &	☐ \$160.00 Filing Fcc, Cert of Status & Certified Copy	ificate		

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPA

## AUTHORIZATION TO TRANSACT BUSINESS

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Distrx LLC				
(Name of Fore	eign Limited Liability Company; must include "Limited Liability Company," "L.I	C.," or "	LLC.")	
(If name unavailable, enter al Liability Company," "L.L.C,	ternate name adopted for the purpose of transacting business in Florida. The alter	nate name	e must inc	slude "Limited
2. Delaware	3			
	of which foreign limited liability (FEI number, if ap	plicable)		
4. April 11th 2016				
Τ.	(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)			
5. 101 S. Garland Ave Su				
Orlando, FL 32801				
	(Street Address of Principal Office)			
6. 101 S. Garland Ave Su	ite #108			
Orlando, FL 32801		207 1001	200	•
	(Mailing Address)	<u>₹</u>	37.	
7. Name and street addres	s of Florida registered agent: (P.O. Box NOT acceptable)	32		en de esta sente La companidade La
Name:	Chris Cook	#¥	2	
Office Address:	101 S. Garland Ave Suite #108	FLO	; D	D
	Orlando , Florida 32801	REF	05	
	(City) (Zip o	ode)		
designated in this applica	gistered agent and to accept service of process for the above stated limit tion, I hereby accept the appointment as registered agent and agree to a	ct in this	capacit	y. I further agree
	ons of all statutes relative to the proper and complete performance of m my position as registered agent.	y duties,	and I ar	n familiar with and
<b>,</b>	160-			
	(Registered agent's signature)			
9. The name title or cons	acity and address of the person(s) who has/have authority to manage is/are			
Chris Cook CEO	renty and address of the person(s) who has/have authority to manage is/are	<b>.</b> .		_
101 S. Garland Ave Suite	#108			
Orlando, FL 32801			· · · · · · · · · · · · · · · · · · ·	•
	of existence, no more than 90 days old, duly authenticated by the official of which it is organized. (If the certificate is in a foreign language, a transabmitted)  Signature of an authorized person			
	in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware the Department of State constitutes a third degree felony as provided for			

Typed or printed name of signee

Delaware

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "DISTRY 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 THIPD DAY OF MAY, A.D. 2016.

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

Authentication: 202248062

Date: 05-03-16

5880076 8300 SR# 20162758135