mbox	XXX4432				
(Requestor's Name) (Address) (Address)	900285890279				
(City/State/Zip/Phone #)	05/27/1601007023 **160.00				
(Business Entity Name) (Document Number) Certified Copies Certificates of Status					
Special Instructions to Filing Officer:	FILED THE THY 21 P & 28 THAT SEE FLORIDA				
Office Use Only					



	COVER LE	TTER			
	TO: 'Registration Section Division of Corporations	р. с. <sup>с</sup> . о			
	KOPPS ON THE RUN L.L.C.				
•	SUBJECT:	_iability Company			
	The enclosed "Application by Foreign Limited Liability Company for a Existence, and check are submitted to register the above referenced for				
	Please return all correspondence concerning this matter to the following	g:			
	LENA D KOPP				
	Name of P	erson			
KOPPS ON THE RUN L.L.C.					
	Firm/Comj	bany			
	2689 US HWY 70				
	Addres	\$			
	HUGO, OK 74743				
	City/State and 2	Zip Code			
	ldkopp@koppsontherun.com				
E-mail address: (to be used for future annual report notification)					
	For further information concerning this matter, please call:				
	Lena D Kopp 580 at (	326-9400			
		rea Code Daytime 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			
		5.00 Filing Fee & SI60.00 Filing Fee, Certificate ed Copy of Status & Certified Copy			

#### 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:

## KOPPS ON THE RUN L.L.C.

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

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") STATE OF OKLAHOMA 46-1296718

(FEI number, if applicable)

3

(Jurisdiction under the law of which foreign limited liability company is organized)

(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5.

4.

2689 US HWY 70, HUGO, OK 74743

(Street Address of Principal Office)

2689 US HWY 70 HUGO, OK 74743

					<u>[</u> ]]	
					1	
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)				in and	<u>~</u>	1
Name:	Pam Avila			ARY D		<b>T</b>
Office Address:	1310 Moose Lane			FLOR	ט קי	D
	Hudson	. Florida	34669	RID	28	
	(City)	,	(Zip	code)	<b>.</b>	

#### **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(s) who has/have authority to manage is/are:

Lena D Kopp Owner/Manager

Sheila Barrett Director

Pam Avila Florida Manager

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)

NA S. Some Signature of an athorized 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, F.S.

Lena D Kopp Owner/Manager

Typed or printed name of signee



# CERTIFICATE OF GOOD STANDING DOMESTIC LIMITED LIABILITY GOMPANY

I, THE UNDERSIGNED, Secretary of State of the State of Oklahoma, do hereby certify that I am, by the laws of said state, the custodian of the records of the state of Oklahoma relating to the right of certain business entities to transact business in this state and am the proper officer to execute this certificate.

**I FURTHER CERTIFY** that <u>"KOPPS ON THE RUN" L.L.C.</u> whose registered agent is <u>LENA DANETTE KOPP</u>, with its registered office at <u>2689 US HWY 70</u> <u>HUGO 74743 74743 USA</u> Oklahoma is a <u>Domestic Limited Liability Company</u> duly organized and existing under and by virtue of the laws of the state of Oklahoma and is in good standing according to the records of this office. This certificate is not to be construed as an endorsement, recommendation or notice of approval of the entity's financial condition or business activities and practices. Such information is not available from this office.



### IN TESTIMONY WHEREOF, I hereunto set my hand and affixed the Great Seal of the

State of Oklahoma, done at the City of Oklahoma City, this <u>23rd</u>, day of <u>May,</u> <u>2016</u>.

Secretary Of State