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Florida Department of State  
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Foreign Limited Liability Company  
SALT LIFE RESTORATION, LLC

Certificate of Status	0
Certified Copy	1
Page Count	06
Estimated Charge	\$155.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
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Help JUL 12 2016

**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:*

1. Saltlife Restoration, LLC  
(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.")

2. Kansas 3. \_\_\_\_\_  
(Jurisdiction under the law of which foreign limited liability company is organized) (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)

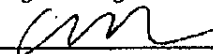
5. 5001 W. 159th Terrace  
Overland Park, KS 66085  
(Street Address of Principal Office)

6. 5001 W. 159th Terrace  
Overland Park, KS 66085  
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  
Name: United States Corporation Agents, Inc.  
Office Address: 13302 Winding Oak Court Suite A  
Tampa, Florida 33612  
(City) (Zip code)

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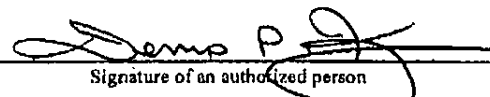
**Registered agent's acceptance:**  
*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with 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)

Cheyenne Moseloy, Assistant Secretary on behalf of United States Corporation Agents, Inc.

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:  
Dennis P. King, Member, 5001 W. 159th Terrace Overland Park, KS 66085

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, F.S.

Dennis P. King  
Typed or printed name of signee

7/7/2016

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**STATE OF KANSAS**  
**OFFICE OF**  
**SECRETARY OF STATE**  
**KRIS W. KOBACH**

I, KRIS W. KOBACH, Secretary of State of the state of Kansas, do hereby certify, that according to the records of this office.

Business Entity ID Number: 5515606

Entity Name: SALTLIFE RESTORATION, LLC

Entity Type: DOM: LTD-LIABILITY COMPANY

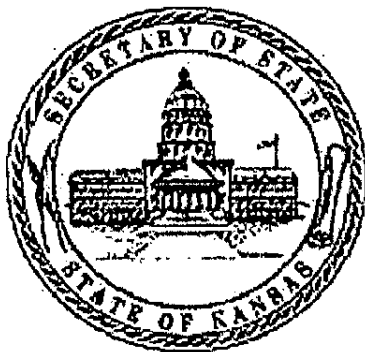
State of Organization: KS

Resident Agent: UNITED STATES CORPORATION AGENTS, INC.

Registered Office: 4701 College Blvd, Suite 110, LEAWOOD, KS 66211

was filed in this office on December 08, 2014, and is in good standing, having fully complied with all requirements of this office.

No information is available from this office regarding the financial condition, business activity or practices of this entity.



In testimony whereof I execute this certificate and affix the seal of the Secretary of State of the state of Kansas on this day of July 07, 2016

Handwritten signature of Kris W. Kobach in cursive script.

**KRIS W. KOBACH**  
**SECRETARY OF STATE**

Certificate ID: 823910 - To verify the validity of this certificate please visit <https://www.kansas.gov/bess/flow/validate> and enter the certificate ID number.