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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUG 05 2016
J. HARRIS

COVER LETTER

**TO: Registration Section ,
Division of Corporations**

SUBJECT: Native Tropics, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Kimberley Anne Westfall

Name of Person

Native Tropics, LLC

Firm/Company

1703 Littleton Court

Address

Winter Springs / Florida / 32708

City/State and Zip Code

kim@westfallint.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kimberley Anne Westfall

407

761-5157

at (_____) _____

Name of Contact Person

Area 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

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☐ \$160.00 Filing Fee, Certificate
of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 28, 2016

KIMBERLEY ANNE WESTFALL
1703 LITTLETON COURT
WINTER SPRINGS, FL 32708

SUBJECT: NATIVE TROPICS LIMITED
Ref. Number: W16000052564

FILED
16 AUG -5 PM 4:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for NATIVE TROPICS LIMITED and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

Suffix included after Limited.,

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: 016A00015874

FILED
2016 AUG -5 PM 3:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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. Native Tropics Limited, 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. Belize 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. 1703 Littleton Court
Winter Springs, Florida 32708
(Street Address of Principal Office)

6. 1703 Littleton Court
Winter Springs, Florida 32708
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Kimberley Anne Westfall
Office Address: 1703 Littleton Court
Winter Springs, Florida 32708
(City) (Zip code)

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.

Kimberley Westfall
(Registered agent's signature)

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

Douglas August Westfall, Partner, 1703 Littleton Court, Winter Springs, Florida 32708

Kimberley Anne Westfall, Partner, 1703 Littleton Court, Winter Springs, Florida 32708

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]
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.

Douglas August Westfall

Typed or printed name of signee

FILED
16 AUG -5 PM 4:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE NO: 15640



**BELIZE COMPANIES AND CORPORATE AFFAIRS REGISTRY
BELMOPAN, BELIZE**

CERTIFICATE OF INCORPORATION

**IN THE MATTER OF THE COMPANIES ACT, Chapter 250 of the Substantive
Laws of Belize, Revised Edition 2000;**


**AND IN THE MATTER of the application for registration and for a Certificate of
Incorporation for NATIVE TROPICS LIMITED.**

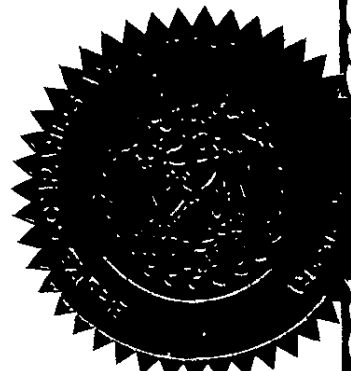
IT IS HEREBY CERTIFIED THAT

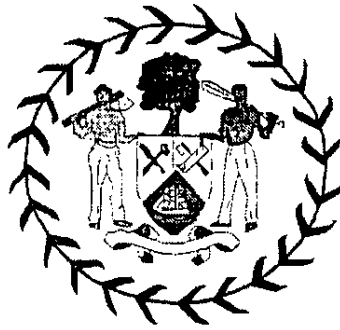
NATIVE TROPICS LIMITED

**is this day registered and incorporated as a limited liability company pursuant to
the provisions of the aforesaid Companies Act.**

**GIVEN under my hand and the seal of the Belize Companies and Corporate Affairs
Registry this 18th day of July, 2016.**


**PATRICIA RODRIGUEZ
FOR REGISTRAR GENERAL
AND REGISTRAR OF COMPANIES**





BELIZE COMPANIES AND CORPORATE AFFAIRS REGISTRY

**Ground Floor of Garden City Hotel,
Mountain View Boulevard,
City of Belmopan, Cayo District,
Belize Central America**

Tel: 501-822-0421

Fax: 501-822-0422

REF: 88/9/1A/03(9542)

DATE: 18th July, 2016

COMPANIES ACT

(CAP. 250, SECTION 17)

CERTIFICATE OF COMPLIANCE

IT IS HEREBY CERTIFIED that the Memorandum and Articles of Association of "NATIVE TROPICS LIMITED" situated at No. 1 Sittee Street, Belize City, Belize C.A. comply with the requirements of the Companies Act (Chapter 250).

This certification is subject to section 9(1) of the said Act.

DATED this 18th day of July, 2016.

**PATRICIA RODRIGUEZ
FOR ATTORNEY GENERAL**