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SECRETARY OF STATE FALLARIASSEE, FLORIDA

T WASHINGTON SEP 3 0 2016

COVER LETTER

TO:		tion Section of Corporation	as				
SUBJE		Keys LLC					
~~~.			Name of l	Limited Liability (	Company	· · · · · · · · · · · · · · · · · · ·	
						ansact Business in Florida," ( y company to transact busine	
Please	return all c	orrespondence c	oncerning this matter to the	following:			
		Sam Fragello					
			N	ame of Person			
	Car Keys						
			Fi	rm/Company			
		7689 SW 24th	Lane				
				Address			
: Gainesville , FL 32608							
			City/S	tate and Zip Code			
	C	ar.keys@como	ast.net				
	•••		E-mail address: (to be used	for future annual	report not	ification)	
For fur	ther inform	ation concerning	g this matter, please call:				
	Sam Fr	agello		<b>724</b> at (	875-76	377	
		Name o	f Contact Person	Area Code	Day	rtime Telephone Number	
	Division Registrat P.O. Box	of Corporations ion Section 6327 see, FL 32314			Division Registrati Clifton B 2661 Exe	of Corporations ion Section uilding cutive Center Circle see, FL 32301	
Enclos		ck for the followi 00 Filing Fee	ing amount:  \$\Pi\$ \$130.00 Filing Fee &  Certificate of Status	□ \$155.00 Filir Certified Copy	ig Fee &	☐ \$160.00 Filing Fee, Cer 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:

Car Kove II C			
1. Car Keys LLC	n Limited Liability Company; must include "L	imited Liability Company ""I I C " or	<u>'IIC''</u>
Dealer Keys LLC	a Linned Daomy Company, must merude L	mited Elabitity Company, 15.12.0., or	LLC. )
	rnate name adopted for the purpose of transaction "LLC.")	ng business in Florida. The alternate nam	e must include "Limited
2. <b>PA</b>	2 81 2	2821113	
(Jurisdiction under the law of company is organized)	which foreign limited liability	(FEI number, if applicable)	<del></del>
4	(Date first transacted business in Florida (See sections 605.0904 & 605.0905, F.S. to	, if prior to registration.)	•
5. 33 Manor Road	(See Sections 005.0704 & 005.0705, 17.5. ii	оссетине ренаку навину)	_
Donora , PA 15033			
· · · · · · · · · · · · · · · · · · ·	(Street Address of Principal Off	ice)	
6. 7689 SW 24th Lane			
Gainesville , FL 3260	8		— .
	(Mailing Address)		· 注意 <b>あ</b>
7. Name and street address	of Florida registered agent: (P.O. Box NO	OT_acceptable)	NE SE
Name:	REGISTERED AGENTS INC.	<del></del>	FIL SEP 29 National
Office Address:	3030 N. Rocky Point Drive, STE	150A	
	ТАМРА	, Florida 33607	STA FLOR
•	(City)	(Zip code)	
this application, I hereby ac	istered agent and to accept service of proc scept the appointment as registered agent atutes relative to the proper and complete on as registered agent	and agree to act in this capacity. If	urther agree to comply familiar with and accept
_	(Registered agent's	signature)	•
8. The name, title or canac	ity and address of the person(s) who has/ha	ive authority to manage is/are:	
Sam Fragello Owner	(FL Resident)	is a united to manage to are.	
7689 SW 24th Lane	<u> </u>		
Gainesville , FL 32608			<del></del>
Gainesville , FL 32006	<del> </del>		
	f existence, no more than 90 days old, duly which it is organized. (If the certificate is emitted)		
_	Signature of m author	ized person	
This document is executed i	n accordance with section 605.0203 (1) (b)	Florida Statutes I am aumre that one	rfalse information
	he Department of State constitutes a third of		

Sam Fragello

## COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

09/23/2016

### TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

Car Keys LLC

is duly registered as a Pennsylvania Limited Liability Company under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.

6 SEP 29 PM 2:

IN TESTIMONY WHEREOF. I have hereunto Set, my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above water.

Secretary of the Commonwealth

ENNSTINAMIN

Certification Number: TSC160923140998-1

Verify this certificate online at http://www.corporations.pa.gov/orders/verify.aspx

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