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(Re	questor's Name)					
(Address)						
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(Cit	y/State/Zip/Phon	e #)				
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(Do	cument Number)					
Certified Copies	_ Certificate	s of Status				
Special Instructions to	Filing Officer:					
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K. SALY

## COVER LETTER

### TO: Registration Section Division of Corporations

Lonestar West Enterprises LLC

SUBJECT:

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:

Cressie Huhn

Name of Person

Lonestar West Inc

Firm/Company

105 Kuusamo Drive

Address

Red Deer County, Alberta, Canada T4E 2J5

City/State and Zip Code

info@lonestarwest.com

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

For further information concerning this matter, please call:

Cressie Huhn		403	887-2074		
Name	of Contact Person	at () Area Code	Daytime	e Telephone Number	
MAILING ADDRESS	:	S	STREET AE	DDRESS:	
Division of Corporation	- S	Division of Corporations			
Registration Section	Registration Section		Registration Section		
P.O. Box 6327	P.O. Box 6327		Clifton Building		
Tallahassee, FL 32314		2661 Executive Center Circle			
		Tallahassee, FL 32301			
Enclosed is a check for the follow	ving amount:				
□ \$125.00 Filing Fee	S130.00 Filing Fee & Certificate of Status	□ \$155.00 Filing Certified Copy		\$160.00 Filing Fee, Certificate Status & Certified Copy	

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#### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA .

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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. Lonestar West Enterprises LLC

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

(If name unavailable, enter al Liability Company," "L.L.C,	Iternate name adopted for the purpose of tra " or "LLC.")	ansacting business in Florida. The alternate	name must include "Limited
2 Oklahoma	د	27-2155291	
	of which foreign limited liability	(FEI number, if applic	able)
4. August 29, 2016			
	(Date first transacted business in F (See sections 605.0904 & 605.0905,	lorida, if prior to registration.)	
5. 105 Kuusamo Drive			FILL SECRETAR
Sylvan Lake, Alberta, (			
	(Street Address of Princip	al Office)	- SEA -
6. <u>105 Kuusamo Drive</u>			ma z L
Red Deer County, Albe			SEE. FLOR
	(Mailing Addres	ss)	
7. Name and street addres	ss of Florida registered agent: (P.O. Bo	ox <u>NOT_acceptable</u> )	·
Name:	NORTHWEST REGISTERED AGE	ENT LLC	
Office Address:	3030 N. ROCKY POINT DRIVE, ST	ГЕ 150А	
Office Address.	ТАМРА	, Florida <sup>33607</sup>	
	(City)	, Florida(Zip code	)
designated in this application to comply with the provision of the comply with the provision of the complexity of the co	tance: gistered agent and to accept service of tion, I hereby accept the appointment ons of all statutes relative to the prope my position as registered agent.	as registered agent and agree to act i	n this capacity. I further agree
	(Registered ag	gent's signature)	
8. The name, title or cana	acity and address of the person(s) who I	has/have authority to manage is/are	
	Member 105 Kuusamo Drive, Sylvan		
	g Member 105 Kuusamo Drive, Sylva		<u>-</u>
9. Attached is a certificate jurisdiction under the law of the translator must be su	of existence, no more than 90 days old of which it is organized. (If the certifica ubmitted)	, duly authenticated by the official hav ate is in a foreign language, a translatio	ring custody of records in the on of the certificate under oath
	Signature of an a	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.

Typed or printed name of signce



## CERTIFICATE OF GOOD STANDING DOMESTIC LIMITED LIABILITY COMPANY

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 LONESTAR WEST ENTERPRISES, LLC whose registered agent is DONALD B. NEVARD, with its registered office at 4800 N LINCOLN BLVD. OKLAHOMA CITY 73105 USA Oklahoma is a Domestic Limited Liability Company 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>3rd</u>, day of <u>November</u>, <u>2016</u>.

Secretary Of State