

W14-77490

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TALLAHASSEE, FLORIDA

FILED

D. BRUCE
DEC 06 2016



FLORIDA DEPARTMENT OF STATE
Division of Corporations
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
2016 DEC -2 PM 2:51

November 16, 2016

RICK COTA
14283 N FENTON ROAD, STE A
FENTON, MI 48430

SUBJECT: ARTTASTIC, LLC
Ref. Number: W16000077490

RECEIVED
2016 DEC -5 AM 11:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

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.

Deborah Bruce
Regulatory Specialist II

Letter Number: 116A00024560

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ARTTASTIC LLC dba FISHSTRONG DISTRIBUTION dba SALTSTRONG DIST
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:

RICK COTA
Name of Person

ARTTASTIC LLC
Firm/Company

14283 N. FENTON RD STE A
Address

FENTON, MI 48430
City/State and Zip Code

tagcota@sbcglobal.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RICK COTA at (810) 577-262
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

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 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. ANTTASTIC 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. STATE OF MICHIGAN (Jurisdiction under the law of which foreign limited liability company is organized) 3. 47-5429990 (FEI number, if applicable)

4. 11-1-2016 (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 14283 N. FENTON RD STE A FENTON, MI 48430 (Street Address of Principal Office)

6. SAME AS ABOVE (Mailing Address)

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

Name: GARRETT MORELOCK Office Address: 6917 VISTA Pkwy NORTH UNIT 17 West Palm Beach, Florida 33411 (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)

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

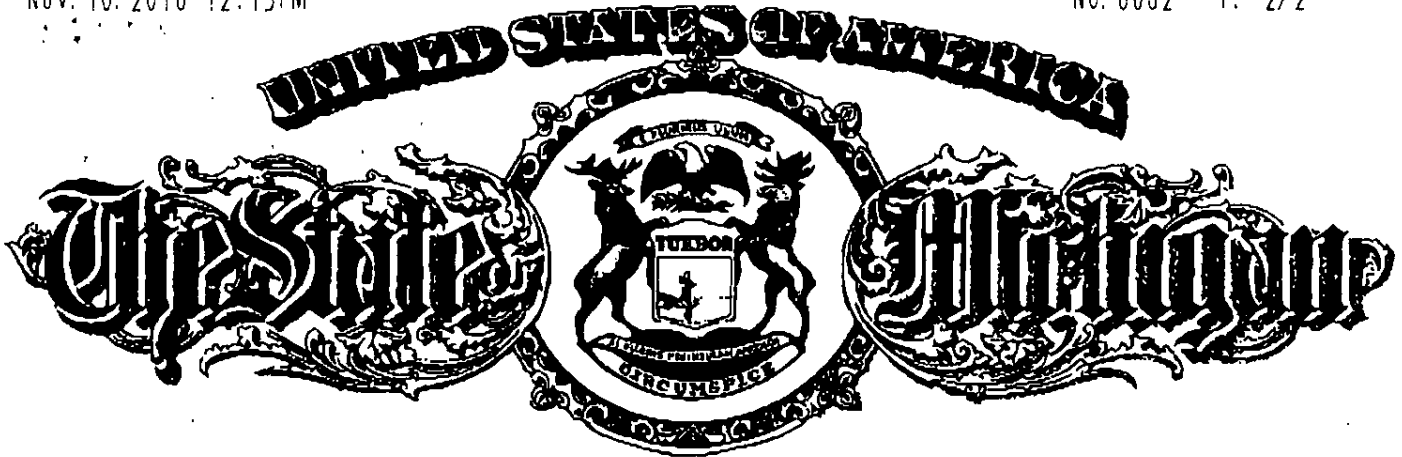
GARRETT MORELOCK PRESIDENT 2990 TECHNOLOGY ROCHESTER HILLS, MI 48309

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.

GARRETT MORELOCK Typed or printed name of signee



Department of Licensing and Regulatory Affairs

Lansing, Michigan

This is to Certify That

ARTTASTIC, LLC

was validly organized on August 21, 2015 as a Limited Liability Company. Said Limited Liability Company is validly in existence under the laws of this state and has satisfied its annual filing obligations.

This certificate is issued pursuant to the provisions of 1993 PA 23, as amended, to attest to the fact that the company is in good standing in Michigan as of this date.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.



In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 10th day of November, 2016

Julia Dale

**Julia Dale, Director
Corporations, Securities & Commercial Licensing Bureau**

**Sent by Facsimile Transmission
E69842**