

W16000009794

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

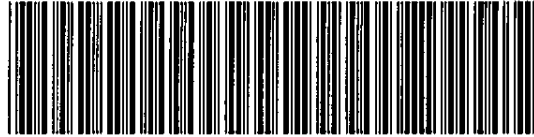
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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2016 DEC -5 A 9:19

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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16 DEC -5 PM 2:17

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

S Warren

DEC 08 2016



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 6, 2016

FLORIDA FILING & SEARCH SERVICES, INC.

SUBJECT: STREAMLINE AUTOMATION SYSTEMS, LLC  
Ref. Number: W16000081405

We have received your document for STREAMLINE AUTOMATION SYSTEMS, LLC and the authorization to debit your account in the amount of \$160.00. However, the document has not been filed and is being returned for the following:

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

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.

Stacey M Warren  
Regulatory Specialist II

Letter Number: 416A00025839

RECEIVED  
DEPARTMENT OF STATE  
16 DEC -7 PM 12:44

Please keep original  
file date.  
Thanks!

**FLORIDA FILING & SEARCH SERVICES, INC.**

**P.O. BOX 10662 TALLAHASSEE, FL 32302**

**155 Office Plaza Dr Ste A Tallahassee FL 32301**

**PHONE: (800) 435-9371; FAX: (866) 860-8395**

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**DATE:** 12-05-16

**NAME:** STREAMLINE AUTOMATION SYSTEMS, LLC

**TYPE OF FILING:** FOREIGN QUALIFICATION

**COST:** 130.00 + 30.00

**RETURN:** CERTIFIED COPY PLEASE + Good Standing

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**ACCOUNT:** FCA000000015

**AUTHORIZATION:** ABBIE/PAUL HODGE

*Abbie Hodge*

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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: STREAMLINE AUTOMATION SYSTEMS, 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:

LAURA RIEBAU

\_\_\_\_\_  
Name of Person

THE WATKINS FIRM, APC

\_\_\_\_\_  
Firm/Company

4275 EXECUTIVE SQ, SUITE 1020

\_\_\_\_\_  
Address

LA JOLLA, CA 92037

\_\_\_\_\_  
City/State and Zip Code

LRIEBAU@WATKINSFIRM.COM

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

For further information concerning this matter, please call:

LAURA RIEBAU

858

535-1511

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

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. STREAMLINE AUTOMATION SYSTEMS, LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")  
N/A  
(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. CALIFORNIA 3. 45-4532116  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. N/A  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 9934 GRANITE PARK CT  
GRANITE BAY, CA 95746  
(Street Address of Principal Office)
6. 9934 GRANITE PARK CT  
GRANITE BAY, CA 95746  
(Mailing Address)
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  
Name: FLORIDA FILING & SEARCH SERVICES, INC.  
Office Address: 155 OFFICE PLAZA DRIVE  
TALLAHASSEE, Florida 32301  
(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.

Abbie Hedge  
(Registered agent's signature)

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

M. CRAIG NAGLER, MANAGER

9934 GRANITE PARK CT

GRANITE BAY, CA 95746

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)

Laura Riebau

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.

LAURA RIEBAU, AUTHORIZED AGENT

Typed or printed name of signee

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2018 DEC -5 A 9:19

FILED

**State of California**  
**Secretary of State**

**CERTIFICATE OF STATUS**

**ENTITY NAME:** STREAMLINE AUTOMATION SYSTEMS, LLC

**FILE NUMBER:** 201127610429  
**FORMATION DATE:** 09/21/2011  
**TYPE:** DOMESTIC LIMITED LIABILITY COMPANY  
**JURISDICTION:** CALIFORNIA  
**STATUS:** ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California,  
hereby certify:

The records of this office indicate the entity is authorized to  
exercise all of its powers, rights and privileges in the State of  
California.

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



IN WITNESS WHEREOF, I execute this  
certificate and affix the Great Seal  
of the State of California this day of  
November 29, 2016.

**ALEX PADILLA**  
**Secretary of State**