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PICK-UP	☐ WAIT	MAIL			
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Certified Copies	_ Certificate	es of Status			
Special Instructions to Filing Officer:					
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TALLAHASSEE, FLORID

JAN 25 2017 S. YOUNG



# FLORIDA DEPARTMENT OF STATE Division of Corporations

December 19, 2016

JOHN K COPELAND, ESQUIRE KRAMER, SOPKO & LEVENSTEIN, P.A. 2300 SE MONTEREY ROAD STE 100 STUART, FL 34996

SUBJECT: LAWN CHAIR USA, LLC

Ref. Number: W16000084515

We have received your document for LAWN CHAIR USA, 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):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

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.

Shelia H Young Regulatory Specialist II

Letter Number: 216A00026899

## **COVER LETTER**

TO:	Registration Section Division of Corporation	s					
SUBJI	LAWN CHAIR USA	A, LLC					
		Name of	Limited Liability (	Company		•	
		eign Limited Liability Complete and to register the above reference to the complete reference above reference and the complete re					
Please	return all correspondence c	oncerning this matter to the	following:				
	JOHN K. COPE	ELAND, ESQUIRE					
		N	ame of Person	(		•	
KRAMER, SOPKO & LEVENSTEIN, P.A.							
	Firm/Company				•		
	2300 S.E. Monterey Road, Suite 100						
			Address				
	Stuart, Florida 3	4996					
	1	City/S	tate and Zip Code			•	
	tbarnes@kslattorr	neys.com				#	
	<del></del> -	E-mail address: (to be use	d for future annual	report not	ification)	DEC	CR LA
For fur	ther information concerning	g this matter, please call:				913	TARY TARY
	Tracy Barnes		772 at (	288-004	48	A	
	Name o	f Contact Person	Area Code	Day	time Telephone Number	8: 53	2001 XIS
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division Registrati Clifton B 2661 Exc	ADDRESS: of Corporations ion Section uilding centive Center Circle ee, FL 32301	53	ÖA A
Enclos	ed is a check for the followi ■ \$125.00 Filing Fee	ing amount:  \$\Boxed{\Omega}\$ \\$ \\$ \\$ \\$ \\$ \\$ \\$ \\$ \\$ \\$ \\$ \\$ \\$	☐ \$155.00 Filir Certified Copy	ng Fee &	□ \$160.00 Filing Fee, C of Status & Certified Co		2

# 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. LAWN CHAIR USA, I	eign Limited Liability Company; mu	st include "Limited Liab	ollity Company," "L.L.C.," or "	LLC.")
(If name unavailable, enter al Liability Company," "L.L.C,"	ternate name adopted for the purpos	e of transacting business	s in Florida. The alternate name	must include "Limited
2. The State of Georgia	<i>i. i.i.e. y</i>	, 10030582		
	of which foreign limited liability	J	(FEI number, if applicable)	<del></del>
4. N/A				
· · · · · · · · · · · · · · · · · · ·	(Date first transacted busine (See sections 605.0904 & 605	ess in Florida, if prior to	registration.)	
5. 4106 Mariah Circle	(000 000110110 000110504 00 000	10501, 175. to votalilino	pointly Habitity)	
Ft. Pierce, Florida 3494	17			
	(Street Address of	Principal Office)		
6. Same as above			·	
				i
	(Mailing	Address)		A A
7. Name and street address	ss of Florida registered agent: (P	O. Box NOT accepta	able)	e S
Name:	JOHN K. COPELAND, ESQU	URE	_	<b>∂</b> 50 50 50 50 50 50 50 50 50 50 50 50 50
Office Address:	2300 S.E. Monterey Road, Suit	te 100		AHASSELLERES JEC 16 AM 8: 53
	Stuart		, Florida 34996	<b>3</b>
	(City)		(Zip code)	ස ජ
designated in this applica to complywith the provision	rgistered agent and to accept ser tion, I hereby uccept the appoin ons of all statutes relative to the my position as registered agents	tment as régistered ap proper and complete	gent and agree to act in this	ity company at the place `s capacity. I further agree
	(Regis	tered agent's signature)		
8. The name, title or caps	acity und address of the person(s)	) who has/have author	ity to manage is/are:	
4106 Mariah Circ	1e			<u></u>
Ft. Pierce, Flor	ida 34947			<del></del>
9. Attached is a certificate jurisdiction under the law of the translator must be so	of existence, no more than 90 da of which it is organized. (If the cubmitted)  Signature	ertificate is in a foreig	n language, a translation of	ustody of records in the the certificate under oath
ml i i	-			
	I in accordance with section 605.0 the Department of State constitu			

Typed or printed name of signee

**GARY POKRANDT** 

Control Number: 10030582

# STATE OF GEORGIA

**Secretary of State** 

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

# TALL AHASSEE, FLORIDA

## CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

# LAWN CHAIR USA, LLC

# a Domestic Limited Liability Company

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number
Date Inc/Auth/Filed
Jurisdiction
Print Date
Form Number

: 13777874 : 04/26/2010 : Georgia : 01/06/2017 : 211



Brian P. Kemp Secretary of State