Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H170000263543)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

:cT

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number: FCA000000023
Phone: (614)280-3338
Fax Number: (954)208-3845

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

Foreign Limited Liability Company Suwannee River Mulch, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

S Warren

JAN 30 2017

To:

COVER LETTER

BJECT	Suwannee River Mu	Ich, LLC					
Name of Limited Liability Company							
ie ericlas Istence,	ed "Application by Fore and check are submitted	eign Limited Liability Comp I to register the above refere	enced for Authoriza	tion to Tra ed liability	msact Business in Florida," Certifical company to transact business in Flo		
ease retu	m all correspondence c	oncerning this matter to the	following:				
	Mike Tate				, '		
	Name of Person						
	Suwannee River Mulch, LLC						
	Firm/Company						
	PO Box 1479						
	Address						
	Cross City, FL 32628						
		City/S	tate and Zip Code				
	mike.tate@suwa	nneelumber.com					
	**************************************	E-mail address: (to be used	for future annual	report not	ification)		
or further	Information concerning	g this matter, please call:		,			
E	Brian K. Smithweck		251 at (650-08	58		
	Name o	f Contact Person	Area Code	Day	nime Telephone Number		
MAILING ADDRESS: Division of Corporations Registration Section				ADDRESS:			
			of Corporations ion Section				
P	O. Box 6327	<i>.</i>		Clifton B			
T	allahassee, FL 32314				ecutive Center Circle see, FL 32301		
	s a check for the follow						
٥	3 \$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	S155.00 Filit Certified Copy	•	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy		
			•••		•		

... i

APPLICATION BY FOREIGN-LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS. IN FEORIDA

1. Susannee River Mi	oreign Limited Ciability Company; must include "Limited I	Liability Company, "ILL.C.	," or "LLC.");	 -
Liability Company, ""L.1.	r alternate name adopted for the purpose of transacting basis	ness in Florida. The alternati	e name.must-include:"L	imited
2. Delaware	3.			
company is biganized	nw of which foreign fimited linbility	(FEI number, il applie	able)	
4. Upon Filing	//S P	- 12 - 12 - 12 - 12 - 12 - 12 - 12 - 12		
5. 40 SW 10 St	(Date lirs) transacted business in Florids, if prior (See sections 605,0904 & 605,0905, F.S. to determ	r to registration.) line penalty lighility)		- durame
Cross City, FL 326		-	下海 法	Addition California F. B.
6. PO Box 1479	(Street Address of Principal Office)			m
Cross City, FL 326	28		THE D	
	(Malling Address)		— <u>64</u>	
7 . Nama and efect add	ress of Florida registered agent: (P.O. Box NOT acco	antahila)	STE STEE	
į	C T Corporation System	chranica	₽	
. Namei	·			
Office Addres	1200 South Pine Island Road			
	Plantation	, Ftorida 33324 (Zip code	•	
Registered agent's ac	(Citý)	(Zín code	:)	•
designated in this appl to complywith the pro	registered agent and to accept service of process for icution, I hereby accept the appointment as registered islans of all statutes relative to the proper and complete from position as registered agent. By: CT Corporation System (Registered agent's signature)	d agent and agree to activete performance of my did	In this capacity. I full lattes, and I am famil	riher agree
8: The name: title or e	npacity and address of the person(s) who has/have nut	nority to unique is/are:		
Charles, P. Miller - Ma				
40 SW 10 St :				
Cross City, FL 32628				
9. Attached is a certific	ale of existence, no more than 90 days old, duly author of which it is organized (If the certificate is in a for submitted) Signature of an authorized per	rsign länguäge, a translati	ving custody of record on of the certificate u	ds in the mder oath
This document is exect submitted in a documen	ted in accordance with section 605,0203 (1) (b), Rhorid to the Department of State constitutes a third degree f	la Statutes, I um aware the	at any false information, 817;155, F.S.	on
:	distant To			

Typed or printed name of signec-

大学を大きるをあるというない

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SUWANNEE RIVER MULCH, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SEVENTH DAY OF JANUARY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

6249713 8300 SR# 20170491939

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 201944073

Date: 01-27-17