## m170000000833

(Re	equestor's Name)		
(Ac	idress)		
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PICK-UP	☐ WAIT	MAIL	
(Ві	usiness Entity Nai	me)	
(Document Number)			
Certified Copies	Certificate	s of Status	
Special Instructions to Filing Officer:  W 10-81649			

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**S Warren**JAN 3 1 2017



## FLORIDA DEPARTMENT OF STATE Division of Corporations

December 6, 2016

STEPHEN HANCOCK 101 CLEARBROOKE BLVD. SEAFORD, DE 19973

SUBJECT: HANCOCK, LLC Ref. Number: W16000081649

We have received your document for HANCOCK, 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):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

The document number of the name conflict is 452457 THE HANCOCK CO INC...

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: 016A00025949

#### COVER LETTER

то:	Registration Section Division of Corporations		
SUBJI	Hancock, LLC		
SODJI	Name of Limited Liability Company		
	osed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate e, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.		
Please	eturn all correspondence concerning this matter to the following:		
	Stephen Hancock		
	Name of Person		
	Hancock, LLC		
Firm/Company			
	101 Clearbrooke Blvd.		
Address			
	Seaford, DE 19973		
	City/State and Zip Code		
	hancockllc.de@gmail.com		
	E-mail address: (to be used for future annual report notification)		
For fur	ner information concerning this matter, please call:		
	Thomas Hancock 302 249-9916		
	Name of Contact Person at ()  Area Code Daytime Telephone Number		
	MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301		
Enclos	a sa check for the following amount:  ■ \$125.00 Filing Fee  □ \$130.00 Filing Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate Copy  □ \$160.00 Filing Fee, Certificate of Status		

### 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 COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Committee to the editor book	THE ATTERNATION OF ENDINGER				
1. Hancock, LLC					
	n Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "L	.LC.")			
THOMAS H	PANCOCK, LLC rnate name adopted for the purpose of transacting business in Florida. The alternate name				
Liability Company," "L.L.C," o		must include "Limi	ted		
2. Delaware	3. 47-1660101				
company is organized)	which foreign limited liability (FEI number, if applicable)				
4. 01/29/2016					
	(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)				
5. 101 Clearbrooke Blvd		, 5			
Seaford, DE 19973	· · · · · · · · · · · · · · · · · · ·				
	(Street Address of Principal Office)				
6. 101 Clearbrooke Blvd			m		
Seaford, DE 19973		THE D	0		
	(Mailing Address)	087			
7. Name and street address of	of Florida registered agent: (P.O. Box NOT acceptable)	DE ST			
Name:	REGISTERED AGENTS INC.				
Office Address:	3030 N. Rocky Point Drive, STE 150A				
	TAMPA , Florida 33607				
_	(City) (Zip code)				
Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation 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					
	Bill Havre/Assistant Secretary/Re	gistered Ager	nts Inc		
	(Registered agent's signature)				
9. The name title or servei	ity and address of the person(s) who has flavor outhority to manage is/ore.				
Stephen Hancock - Mana	ity and address of the person(s) who has/have authority to manage is/are:				
		<del></del>			
101 Clearbrooke Blvd. Se	paford, DE 19973				
	f existence, no more than 90 days old, duly authenticated by the official having cut which it is organized. (If the certificate is in a foreign language, a translation of the smitted)  Signature of an authorized person				
	n accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any fine Department of State constitutes a third degree felony as provided for in s.817.1:  Typed or printed name of signee				

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# Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "HANCOCK, 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 SEVENTEENTH DAY OF NOVEMBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HANCOCK, LLC" WAS FORMED ON THE TWENTY-SECOND DAY OF AUGUST, A.D. 2014.

The state of the s

Authentication: 203355685

Date: 11-17-16