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K. SALY FEB 2 4 2017



February 8, 2017

MIKE WERNEL WESTERN FIRST AID & SAFETY, LLC 5360 COLLEGE BLVD, STE. 200 OVERLAND PARK, KS 66211

SUBJECT: WESTERN FIRST AID & SAFETY, LLC

Ref. Number: W17000011376

We have received your document for WESTERN FIRST AID & SAFETY, LLC and your check(s) totaling \$130.00. 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.

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.

Karen A Saly Regulatory Specialist II

Letter Number: 517A00002571

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: WESTERN FIRST AID + Safety, 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:
Mike Weenel Name of Person
Western First Airs + Safety, LLC Firm/Company
5360 Collège BLUD, STE 200 Address
Overland Park, KS 66211 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Mike Wernel at (913) 660-7729 Name of Contact Person Area Code Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 MAILING ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: S125.00 Filing Fee \$\times\$

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: Western First Ash a Safety, 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.") 3. 20-0399409 (FEI number, if applicable) KANSAS Jurisdiction under the law of which foreign limited liability NA (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 5360 College BLVD, STE 200 5360 College BLVA, STE 200 Overland Paril, KS 66211
(Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: 1014 South Collien Blus #123 Office Address: MARCE ISARD, Florida 34145
(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 complywith 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, 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/arc: Wernel, Controller, 5360 college BLVD, STEDOD O.P. KS 66213 Pres 5360 GlegE Blus # 200 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.

Tames Riggs
Typed or printed name of signee

STATE OF KANSAS OFFICE OF SECRETARY OF STATE

I, Kris W. Kobach, Kansas Secretary of State, certify that the records of this office reveal the following:

Business Entity ID Number: 3546652

Entity Name: WESTERN FIRST AID & SAFETY, LLC

Entity Type: KANSAS LIMITED LIABILITY COMPANY

State of Organization: KANSAS

Resident Agent: James Riggs

Registered Office: 5360 COLLEGE BLVD, SUITE 105, OVERLAND PARK, KS,

66211

was filed in this office November 12, 2003, and is in good standing, having fully complied with all requirements of this office.

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



In testimony whereof: I execute this certificate and affix the seal of the Secretary of State of the state of Kansas on this day of February 14, 2017.

Mu W. Holach

KRIS W. KOBACH
KANSAS SECRETARY OF STATE