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#### **COVER LETTER**

TO: Registration Section Division of Corporations		
B6 Manufacturing, LLC SUBJECT:		
Name	of Limited Liability Company	
The enclosed "Application by Foreign Limited Liability Co Existence, and check are submitted to register the above re	ompany for Authorization to Transact Business in Florida," eferenced foreign limited liability company to transact busin	Certificate of less in Florida.
Please return all correspondence concerning this matter to	the following:	
Allan C Bir Jr		
	Name of Person	
B6 Manufacturing LLC		
	Firm/Company	
1361 Bedford Drive Suite 101		
	Address	
Melbourne, FL 32940		
Cit	ty/State and Zip Code	
erin@mi-techmetals.com		
E-mail address: (to be u	used for future annual report notification)	<b>√3</b>
For further information concerning this matter, please call:		A SAN CANAGE
Erin Bir	321 501-2816 677	1
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	ا العام العام
Enclosed is a check for the following amount:  \$\Boxed{125.00}\$ \text{ filing Fee} \Boxed{\Boxed{130.00}} \text{ filing Fee & Certificate of Status}\$	& ☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Co Certified Copy of Status & Certified Cop	

## 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:

B6 Manufacturing, LLC				
(Name of Fore	ign Limited Liability Company; must include "Limited Lial	bility Company," "L.L.C.," or	·LLC.")	
(If name unavailable, enter al	ternate name adopted for the purpose of transacting busines	r in Florida The alternate nam	o must in abud	la M invitad
Liability Company," "L.L.C,"	" or "LLC.")	s in Florida. The alternate nam	e must menud	ie Limited
2. State of Indiana	3. 81-4574941			
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)		<del></del>
4. March 6, 2017			_	
	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determine	registration.) e penalty liability)		
5. 4701 Massachusetts A	venue		<u>.</u>	
Indianapolis, IN 46218				
1361 Dadfard Daine # 1	(Street Address of Principal Office)		•	
6. 1361 Bedford Drive # 1	101		-	
Melbourne, FL 32940			_	
	(Mailing Address)			
7. Name and street address	ss of Florida registered agent: (P.O. Box NOT accept	able)		
Name:	Erin Bir	<b></b>		
Office Address:	1361 Bedford Drive #101	_	[A]	
	Melbourne	_ , Florida <u>32940</u>		England,
<b>D</b>	(City)	(Zip code)	- ASS	Faces Faces
Registered agent's accep Having been named as re	tance: gistered agent and to accept service of process for th	e above stated limited liabi	lity compan	y at the place
	tion, I hereby accept the appointment as registered a ons of all statutes relative to the proper and complete			
	my position as registered agent.	perjormance of my dunes	. ET	
	Fold W. Bus)			ري. د
	(Registered agent's signature)	· · · · · · · · · · · · · · · · · · ·		
8. The name, title or caps	acity and address of the person(s) who has/have author	rity to manage is/are:		
Allan C Bir Jr - Managing	g Member			
			<del></del>	
<u> </u>				
			<del></del>	
	of existence, no more than 90 days old, duly authentic			
of the translator must be s	of which it is organized; (If the certificate is in a forei, ubmitted)	gn language, a translation of	the certifica	ate under oath
	( Man C Dix			
	Signature of an authorized perso	n	-	
	in accordance with section 605.0203 (1) (b). Florida			nation
submitted in a document to	the Department of State constitutes a third degree fel	ony as provided for in s.817	.155, F.S.	
	Allan C Bir Jr			

Typed or printed name of signee

# State of Indiana Office of the Secretary of State

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

I, CONNIE LAWSON, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

### **B6 MANUFACTURING, LLC**

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on December 02, 2016, and was in existence or authorized to transact business in the State of Indiana on March 06, 2017.

I further certifiy this Domestic Limited Liability Company has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution, or expiration has been filed or taken place.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, March 06, 2017

Corrie Famon

CONNIE LAWSON
SECRETARY OF STATE

201612021169278 / 2017244039 Verify this certificate:https://bsd.sos.in.gov/ValidateCertificate