# M1700004522

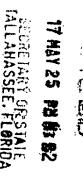
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700299460537

05/25/17--01016--011 \*\*160.00



MAY 2 6 2617

Y SULK!

#### **COVER LETTER**

TO: Registration Section

Division of Corporations '

<sub>subject:</sub> Merit Logistics, 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:

### Stuart Einbinder

Name of Person

Merit Logistics, LLC

Firm/Company

33332 Valle Road, No. 100

Address

San Juan Capistrano, CA 92675

City/State and Zip Code

seinbinder@meritlogistics.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

## Stuart Einbinder

<u>.</u>949

481-0685

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

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

□ \$130.00 Filing Fee & Certificate of Status

☐ \$155.00 Filing Fee & Certified Copy

■ \$160.00 Filing Fee, Certificate of Status & Certified Copy

# APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTIIORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 08:0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN TAMITED LIABILITY COMPANYTOTRANSACT BUNNESS BY THE STATE OF FLORIDA:

	name adopted for the purpose of transacting business in		.iability Company," "L.L.C," or "LLC.")
Delaware (Jurisdiction under the law of v	which foreign lamited liability company is organized)	- 3. <u>46-1734845</u> (四元	mber, il upplicable)
Have not transacted i	business in Florida since prior registra	ation (Doc # M1400006830) was wit	hdrawn
	(Date first transacted business in Florida, if pix (See sections 605,0904 & 605 0905, F.S. to de		11010417
33332 Valle Road,		6, 33332 Valle Road, No	o. 100
(Street Address of Principal Office) San Juan Capistrano, CA 92675		(Mading Address) San Juan Capistrano, CA 92675	
Name:	InCorp Services, Inc.		
Office Address:	17888 67th Court North		E E
		<del></del>	<b>三角 经</b>
	Loxahatchee	Florida 33470	<b>5</b> - <b>3</b>
ing been named as ro gnated in this applica omply with the provis	(C·(y)	it as registered agent and agree to a over and complete performance of m	ed liability compliny angle post in this capally? I farther y duties, and complant angles of
ving been named as rignated in this application the provist accept the obligation  The name, title or cap	otance: egistered agent and to accept service ation, I hereby accept the appointmentions of all statutes relative to the project of any position as registered agent acity and address of the person(s) who	of process for the above stated limited as registered agent and agree to accept and complete performance of managements (Kathy Shin on beauty Spaniture)  The has/have authority to manage is/are:	ed liability company angle post in this capably? I farther y duties, and soom farther y duties, and so farther y duties and y duties are y duties.
ving been named as rignated in this application of the provise accept the obligation.  The name, title or cap	otance: egistered agent and to accept service antion, I hereby accept the appointmentions of all statutes relative to the project of my position as registerely agent acity and address of the person(s) who name and Address:	of process for the above stated limited as registered agent and agree to accept and complete performance of many Mathy Shin on beauty Spanitive)	ed liability company and e post in this capable? I ferther y duties, and company familiar y shalf of InCorp Services, Ir
ignated in this applications in the provised accept the obligation of the name, title or cap	otance: egistered agent and to accept service ation, I hereby accept the appointmentions of all statutes relative to the profits of my position as registered agent acity and address of the person(s) who Name and Address:  Cesar Scolari	of process for the above stated limited as registered agent and agree to accept and complete performance of managements (Kathy Shin on beauty Spaniture)  The has/have authority to manage is/are:	ed liability company angle post in this capably? I farther y duties, and soom farther y duties, and so farther y duties and y duties are y duties.
ving been named as rignated in this application of the provise accept the obligation.  The name, title or cap	otance: egistered agent and to accept service antion, I hereby accept the appointmentions of all statutes relative to the project of my position as registerely agent acity and address of the person(s) who name and Address:	of process for the above stated limited as registered agent and agree to accept and complete performance of managements (Kathy Shin on beauty Spaniture)  The has/have authority to manage is/are:	ed liability company angle post in this capably? I farther y duties, and soom farther y duties, and so farther y duties and y duties are y duties.
ving been named as rignated in this application the provise accept the obligation  The name, title or cap	otance: egistered agent and to accept service ation, I hereby accept the appointmentions of all statutes relative to the profits of my position as registered agent acity and address of the person(s) who Name and Address:  Cesar Scolari  33332 Valo Road, No. 100	of process for the above stated limited as registered agent and agree to accept and complete performance of managements (Kathy Shin on beauty Spaniture)  The has/have authority to manage is/are:	ed liability company angle post in this capably? I farther y duties, and soom farther y duties, and so farther y duties and y duties are y duties.
ving been named as rignated in this application the provision of accept the obligation.  The name, title or cap Title or Canacity:  Manager	ntance: egistered agent and to accept service antion, I hereby accept the appointmentions of all statutes relative to the project of my position as registered agent acity and address of the person(s) who Name and Address:  Cesar Scolari  33332 Valle Read, No. 100  Sen Jun Capistrano, CA 92075  Michael Bletko 33332 Valle Read, No. 100	of process for the above stated limited as registered agent and agree to accept and complete performance of managements (Kathy Shin on beauty Spaniture)  The has/have authority to manage is/are:	ed liability company angle post in this capably? I farther y duties, and soom farther y duties, and so farther y duties and y duties are y duties.
ving been named as rignated in this application omply with the provise accept the obligation.  The name, title or cap Title or Canacity:  Manager  Manager	otance: egistered agent and to accept service ation, I hereby accept the appointmentions of all statutes relative to the project of the person of the	of process for the above stated limited as registered agent and agree to accept and complete performance of managements (Kathy Shin on beauty Spaniture)  The has/have authority to manage is/are:	ed liability company angle p ct in this capably? I farther y duties, and com farthlar y shalf of InCorp Services. In
ving been named as raignated in this application omply with the provise accept the obligation.  The name, title or cap Title or Canacity:  Manager  Manager	otance: egistered agent and to accept service ation, I hereby accept the appointmentions of all statutes relative to the project of the person of the	of process for the above stated limited as registered agent and agree to accept and complete performance of managements (Kathy Shin on beauty Spaniture)  The has/have authority to manage is/are:	ed liability company angle p ct in this capably? I farther y duties, and com farthlar y shalf of InCorp Services. In
ving been named as raignated in this applicationally with the provisionally with the provisional accept the obligation.  The name, title or caparite or Canacity:  Manager  Manager  Manager  Manager	cepistered agent and to accept service antion, I hereby accept the appointmentions of all statutes relative to the project of the person of the perso	(Appendix of process for the above stated limits as registered agent and agree to accept and complete performance of my Kathy Shin on being the segmentary of the has/have authority to manage is/are:  Title or Capacity:	ed liability company and per per in this capality. I further to duties, and company familiar to the shalf of InCorp Services, Ir
ving been named as raignated in this application the provise accept the obligation.  The name, title or cap Title or Canacity:  Manager  Manager  Se attachments if necessattached is a certificate	cepistered agent and to accept service antion, I hereby accept the appointmentions of all statutes relative to the project of the person of the perso	(Appendix of process for the above stated limits as registered agent and agree to accept and complete performance of my Kathy Shin on being the segmentary of the has/have authority to manage is/are:  Title or Capacity:	ed liability company angle per in this capably. I perher y duties, and cam familiar y half of InCorp Services, In Name and Address:

Typed or printed name of signed

# Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "MERIT LOGISTICS, 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 NINTH DAY OF MAY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MERIT LOGISTICS,

LLC" WAS FORMED ON THE TWENTY-EIGHTH DAY OF FEBRUARY, A.D. 2012.

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

A STATE OF THE STA

Authentication: 202508603

Date: 05-09-17

5116470 8300 SR# 20173263586