# M17000005918

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

Office Use Only



000300782730

000300782780 07/06/17--01006--020 \*\*125.00

STUNCTION OF STATE TALLANASSEE, FLORID

S. WARREN JUL 1 3 2017



CELEBRATING 30 YEARS ~ 1986 - 2016

Suzanne L. Schmitt, Paralegal sschmitt@mlklaw.com

July 3, 2017

Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314

RE: Application by Foreign Limited Liability Company for Authorization to Transact Business

Dear Sir or Madam:

Enclosed please find for filing the Application by Foreign Limited Liability Company for Authorization to Transact Business for St. Aubrey Services, LLC. In addition, I have enclosed a check in the amount of \$125.00 to cover the filing fee. Once the document has been filed, please return a filed stamped copy to me in the envelope provided.

Thank you for your assistance in this matter.

Very truly yours

Suzanne L. Schmitt

Paralegal

Enclosures

#### **COVER LETTER**

TO:

	Division of Corporatio						
JEC	St. Aubrey Services	s, LLC					
Name of Limited Liability Company							
nel enc	losed "Application by Fo	reign Limited Liability Com ed to register the above refer	pany for Authoriza enced foreign limi	ation to Tra ted liability	ansact Business in Florida," Certific y company to transact business in Fl		
e re	eturn all correspondence	concerning this matter to the	following:				
	Stephen J. Sm	ith					
		Name of Person					
	McCarthy Leo	nard & Kaemmerer LC					
		Firm/Company					
	825 Maryville	Centre Drive, Suite 300	1				
			Address		<del></del>		
	Town and Cou	intry, MO 63017					
	-	City/S	tate and Zip Code	I			
	AStuecken@ens	suretyventures.com					
		E-mail address: (to be use	d for future annua	report no	tification)		
urth	her information concerning	ng this matter, please call:					
	Suzanne Schmitt, Paral	egal	314 at (	392-52	00		
	Name	of Contact Person	Area Code	Day	time Telephone Number		
	MAILING ADDRESS: Division of Corporations Registration Section			Division	F ADDRESS: of Corporations ion Section		
	P.O. Box 6327 Taliahassee, FL 32314			Clifton B 2661 Exe			
sec	d is a check for the follow	2	E files on Pil	E O-	El 6140 00 Elling For Continue		
	■ \$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filis Certified Copy	_	□ \$160.00 Filing Fee, Certificate of Status & Certified Copy		

# 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:

(Jurisdiction under the law of which foreign limited liability company is organized)  4. (Date first transacted business in Florida, if prior to registration.) (See sections 605 9904 & 605.0905, F.S. to determine penalty liability of the company		er, if applicable)
(Jurisdiction under the law of which foreign limited liability company is organized)  4.   (Date first transacted business in Florida, if prior to registration.) (See sections 605 0904 & 605.0905, F.S. to determine penalty liability of the company of the compan	(FEI number	er, if applicable)
(Date first transacted business in Florida, if prior to registration.) (See sections 605 0904 & 605.0905, F.S. to determine penalty liabil)  5. 2342 Technology Drive, Suite 325 (Sirect Address of Principal Office)  6. 23	<b>W</b>	
(Date first transacted business in Florida, if prior to registration.) (See sections 605 0904 & 605.0905, F.S. to determine penalty liabil)  5. 2342 Technology Drive, Suite 325 (Street Address of Principal Office)  6. 23		
5. 2342 Technology Drive, Suite 325 6. 23 (Street Address of Principal Office)	ity)	
(Street Address of Principal Office)	42 Technology Drive, Su	ite 325
OlEvillan MO 42249	(Mailing Addr	ess)
O Faiton, INO 03308	Fallon, MO 63368	
. Name and street address of Florida registered agent: (P.O. Box NOT acce	ptable)	ු ල මු
C.T. Compountion Stratum		
Name: C 1 Corporation System	_	SF 🚡
Office Address: 1200 South Pine Island Road		호표 <b>5</b>
Plantation	, Florida 33324 (Zip code	•
(City)	, FIOTIQA(Zin code	<del></del>
nd accept the obligations of my position as registered agent.	Stephanie Hencz - Asst. Seci	retary
Stephone Honey (Registered open's signature)		<del></del>
(vegoreter offers > 218/merge)		
• • •	nority to manage is/are: or Capacity:	Name and Address:
Member See Attached		
Member Scc Attached		
Member See Attached		
Member See Attached		
8. The name, title or capacity and address of the person(s) who has/have auth  Title or Capacity:  Name and Address:  Title	-	Name and Address:
Member See Attached		•
Member Scc Attached		

Typed or printed name of signee

### <u>Attachment</u>

Item 8. The name, title or capacity and address of the person(s) who have authority to manage are:

Title	Name and Address
Member	Brian Patrick Fox and Brittany Marie Fox, Trustees of the Joint Revocable Trust of Brian Patrick Fox and Brittany Marie Fox, dated December 19, 2016
	2342 Technology Drive, Suite 325 O'Fallon, MO 63368
Member	Patrick James O'Brien and Susan Marie O'Brien, Trustees of the Qualified Joint Revocable Trust of Patrick James O'Brien and Susan Marie O'Brien, dated January 11, 2017
	2342 Technology Drive, Suite 325 O'Fallon, MO 63368

17 JUL -6 PH 1: 45

STATE OF MISSOURY



## John R. Ashcroft Secretary of State

CORPORATION DIVISION CERTIFICATE OF GOOD STANDING

I, JOHN R. ASHCROFT, Secretary of State of the STATE OF MISSOURI, do hereby certify that the records in my office and in my care and custody reveal that

St. Aubrey Services, LLC LC1008724

was created under the laws of this State on the 5th day of November, 2009, and is active, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 3rd day of July, 2017.

Secretary of State



Certification Number: CERT-07032017-0020