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SECRETARY OF STATE
TALLAHASSEE FLORIDA

5/10/17



August 3, 2017

MARY ELIZABETH M. BROWDER, ESQUIRE 1201 N. ORANGE STREET, SUITE 400 WILMINGTON, DE 19801 US

SUBJECT: ALL MY SONS MOVING & STORAGE OF FT. LAUDERDALE, LLC

Ref. Number: W17000063854

We have received your document for ALL MY SONS MOVING & STORAGE OF FT. LAUDERDALE, 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.

Please return the corrected original and one copy of 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) 254-6051.

Judy A Leggett Regulatory Specialist II Registration Section

Letter Number: 217A00015808

COVER LETTER

TO:

TO;		tion Section of Corporation	ns			
SUBJI	2 52 524		g & Storage of Ft. Lauderd:	ale, LLC		
SUBJI	EC1	<u>,</u>	Name of	Limited Liability (Company	
						nsact Business in Florida," Certificate of company to transact business in Florida.
Please	return all c	orrespondence c	concerning this matter to the	following:		
		Mary Elizabeth	M. Browder, Esquire			
			N	ame of Person		
		Monzack Mers	ky McLaughlin and Browde	er, PA		
			F	irm/Company	-	
		1201 N. Orange	e Street, Suite 400			
				Address		
		Wilmington, D	E 19801			
			City/S	State and Zip Code		
	п	ibrowder@mon				
	_		E-mail address: (to be use	d for future annual	report not	ification)
For fur	ther inform	ation concerning	g this matter, please call:			
	Mary El	zabeth M. Brov	vder, Esquire	302 at (656-816	
	•	Name o	f Contact Person	Area Code	Day	time Telephone Number
	Division Registrat P.O. Box	GADDRESS: of Corporations ion Section 6327 see, FL 32314			Division Registrati Clifton B 2661 Exe	ADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301
Enclos		k for the follow 00 Filing Fee	ing amount: ☐ \$130.00 Filing Fee & Certificate of Status	S155.00 Filir Certified Copy	ng Fee &	☐ \$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:

*****************			112192 25 9 9 9 12 13 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	name adopted for the purpose of transacting business in Florida		d Liability Company," "L.L.C," or "Ll.C,")
Delaware	which foreign limited liability company is organized)	3. 20-5869032	number, if applicable)
(Authorition made the law at	which diverge indices mainty company is deganized)	(1.01	manuer, ii appiicame)
4. 7/17/2017			
	(Date first transacted business in Florida, if prior to reg (See sections 605,0904 & 605,0905, F.S. to determine	istration.) penalty liability)	
5. 3760 Park Central B	oulevard North	6, 2400 Old Mill Road	
	f Principal Office)	(Mailing	; Address)
Pompano Beach, FL	3,5(0)4	Carrollton, TX 75007	
	ess of Florida registered agent: (P.O. Box) Corporation Service Company	NOT acceptable)	
Name:	1201 17 0		
Office Address:	1201 Hays Street	·	
	Tallahassee	, Florida <u>32301</u>	
Having been named as lesignated in this applic ocomply with the provi	ptance: registered agent and to accept service of pro- vation, I hereby accept the appointment as r sions of all statutes relative to the proper ar ns of my position as registered agent.	egistered agent and agree to nd complete performance of	act in this capacity. I further a my duties, and I am familiar w
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Typed or printed name of signee

Page 1



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

DELAWARE, DO HEREBY CERTIFY "ALL MY SONS MOVING & STORAGE OF FT.

LAUDERDALE, 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 TWENTY-FOURTH DAY OF

JULY, A.D. 2017.

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

Authentication: 202933248

Date: 07-24-17