

M17000007831

(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:

W17-71154 RA Sign

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2017 SEP 13 PM 12:22
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FALL ARIZONA, AZ

K. SALY
SEP 15 2017

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: KR Calvert Co, 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:

Klein Calver

Name of Person

KR Calvert Co, LLC

Firm/Company

113 Seaboard Lane, Ste #C-270

Address

Franklin, TN 37067

City/State and Zip Code

klein.calvert@caliber.care

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

For further information concerning this matter, please call:

Klein Calvert

615

224-8464

at (_____) _____

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 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:

1. KR Calvert Co, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
dba Caliber
(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.")
2. Kansas
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 14-1947972
(FBI number, if applicable)
4. August 16th, 2017
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability.)
5. Caliber of Florida
(Street Address of Principal Office)
1576 Bella Cruz Dr #429
The Village, FL 32159
6. KR Calvert Co, LLC dba Caliber
(Mailing Address)
113 Seaboard Lane #C-270
Franklin, TN 37067

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Klein Calvert

Office Address: 1576 Bella Cruz Dr #429
The Villages, Florida 32159
(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 comply with 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.



(Registered agent's signature)

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

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>President</u>	<u>Klein Calvert</u> <u>121 Sedona Woods Trail</u> <u>Nolensville, TN 37135</u>	<u>V-P</u>	<u>Pamela Calvert</u> <u>121 Sedona Woods Trail</u> <u>Nolensville, TN 37135</u>
<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>	<u> </u>

(Use attachments if necessary)

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)

10. 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.



Signature of an authorized person

Klein Calvert

Typed or printed name of signee

STATE OF KANSAS
OFFICE OF
SECRETARY OF STATE
KRIS W. KOBACH

FILED
2017 SEP 13 PM 12:23
CLERK OF STATE
TALLAHASSEE, FLORIDA

I, KRIS W. KOBACH, Secretary of State of the state of Kansas, do hereby certify, that
according to the records of this office.

Business Entity ID Number: 6082705

Entity Name: K R CALVERT CO LLC

Entity Type: DOM: LTD LIABILITY COMPANY

State of Organization: KS

Resident Agent: Kyle R Calvert

Registered Office: 12621 W 145th St, OLATHE, KS 66062

was filed in this office on January 27, 2006, 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 August 17, 2017

Kris W. Kobach

KRIS W. KOBACH
SECRETARY OF STATE

Certificate ID: 969708 - To verify the validity of this certificate please visit
<https://www.kansas.gov/bess/flow/validate> and enter the certificate ID number.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2017 SEP 13 PM 2:37

TALLAHASSEE, FLORIDA

August 30, 2017

KLEIN CALVER
K R CALVERT CO LLC
113 SEABOARD LANE, STE. #C-270
FRANKLIN, TN 37067

SUBJECT: K R CALVERT CO LLC
Ref. Number: W17000071154

We have received your document for K R CALVERT CO 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 registered agent must sign accepting the designation.

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: 317A00017854