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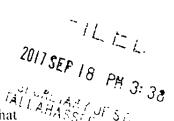
COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: National Equipment leasing 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:				
Spring Wittmeier Name of Person				
National Equipment Leasing, LLC				
Lolo S. Adems St. Address				
Kansas C'ty, KS 66105 City/State and Zip Code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Spring Withmuler at (913) 749-1201 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 266! Executive Center Circle Tallahassee, FL 3230!				
Enclosed is a check for the following amount: \$\Begin{align*} \Pi \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				

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

IN COMPLIANCE WITH SECTION COMPANY TO TRANSACT BUSINES	605.0902, FLORIDA STATUTES, THE FOI SS INTHE STATE OF FLORIDA:	LLOWING IS SUBMITTED TO REGI	STER A FOREIGN LIMITED LIABILITY
	i content Lasing, LLC distributed Limited	Listellity Company," "LLC," or "LC	. '
(If rame unavailable, enter abernate same ado	pted for the purpose of transacting business in Florid	a. The atternate name want include "Limbed [iability Commun " "I I C " or " I C "
2. Kansas	ign limited hisbility company is organized)	3. 81-100-98	95_ mber, if applicable)
48/1/2	2017		
S 1 10 C 11 10 10	ath first transacted business in Florida, if prior to reg ex sections 605.0904 & 605.0905, P.S. to determine C /	penalty tiebility)	0.1
Street Address of Principal	0t(ac)	6. LOLO S. HOLOR	ns St.
kenses Gity	KS Leleios	_ Kansas Cij	y, KS 66105
			The state of the s
Λ	orida registered agent: (P.O. Box 1		
Name:	rporation Service Con	ripeury	بر براند پین باشد
Office Address:	101 Hays Street	 ,	
ユ	allahasse, FL 323		<u></u>
Registered agent's acceptance:	(City)	(Zip coe	,
Having been named as registere designated in this application, I	d agent and to accept service of pro- hereby accept the appointment as re	cess for the above stated limited	l liability company at the place
to comply with the provisions of and accept the obligations of my	all statutes relative to the proper an	d complete performance of my	duties, and I am familiar with
una accept the vougations of my	Mission as regularen ageni.		
<u> </u>	(Registated agent's signal	ture)	
8. The name, title or capacity an	d address of the person(s) who has/h	eve authority to manage is/are:	
Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
Member	Michael T. Elis 40 S. Adams St. Kansas Lity, KS blows	Member	Steven F. Aby St. W. KC KS 6005
Member	Onuglas F. Moskow 12	,	
	leio 9 Adams St.		
(Use attachments if necessary)			
9. Attached is a certificate of exist jurisdiction under the law of which of the translator must be submitted	ence, no more than 90 days old, duly a it is organized. (If the certificate is I)	authenticated by the official hain a foreign language, a translati	ving custody of records in the on of the certificate under oath
10. This document is executed in a submitted in a document to the Dep	confidence with section 03,0203 (1) satisfient of State constitutes a third of	(b), Florida Statutes. I am aware	: that any false information .817.155, F.S.
	Michael T 511. A.	month per per	y -
	Michael J. Ellis, Me Typed or prime	d marge of signee	

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



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: 8169286

Entity Name: NATIONAL EQUIPMENT LEASING, LLC

Entity Type: DOM: LTD LIABILITY COMPANY

State of Organization: KS

Resident Agent: MICHAEL J ELLIS

Registered Office: 610 S Adams Street, KANSAS CITY, KS 66105

was filed in this office on January 12, 2016, 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 September 13, 2017

KRIS W. KOBACH SECRETARY OF STATE

ertificate ID: 975166 - To verify the validity of this certificate please visit ps://www.kansas.gov/bess/flow/validate and enter the certificate ID number.



August 24, 2017

SPRING WITTMEIER NATIONAL EQUIPMENT LEASING, LLC 610 S ADAMS ST. KANSAS CITY, KS 66105

SUBJECT: NATIONAL EQUIPMENT LEASING, LLC

Ref. Number: W17000069795

We have received your document for NATIONAL EQUIPMENT LEASING, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Letter Number: 317A00017473

Karen A Saly Regulatory Specialist II

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