

M17000008203

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

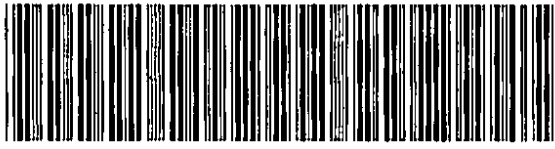
(Document Number)

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K. SALY
SEP 26 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Syndeo Outsourcing II, L.L.C.

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:

Todd Matheny

Name of Person

Syndeo Outsourcing II, L.L.C.

Firm/Company

3504 N Great Plains Dr Ste 200

Address

Wichita, KS 67220

City/State and Zip Code

tmatheny@syndeohro.com

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

For further information concerning this matter, please call:

Todd Matheny

316
at ()

440-9907

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. Syndeo Outsourcing, L.L.C.
(Name of Foreign Limited Liability Company must include "Limited Liability Company," "L.L.C.," or "LLC.")
(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.")

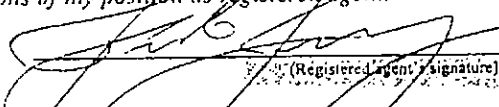
2. Kansas 3. 71-0893511
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. April 2016
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 3504 N Great Plains Dr., Ste. 200 6. _____
(Street Address of Principal Office) (Mailing Address)
Wichita, KS 67220

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: Corporate Creations Network, Inc.
Office Address: 11380 Prosperity Farms Road #221E
Palm Beach Gardens, Florida 33410
(City) (Zip code)

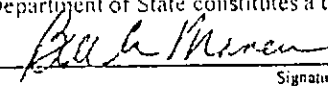
Registered agent's acceptance:
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply 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) **Fernando Jimenez, Special Secretary**

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
Title or Capacity: Name and Address: Title or Capacity: Name and Address:
CEO, Member Bill Maness
2236 N Williamsgate Ct
Wichita, KS 67228
Member Gary Hardman
23 Sagebrush
Wichita, KS 67230

(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
Bill G Maness
Typed or printed name of signer

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

2017 SEP 25 PM 4:38
DEPT. 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: 3341799

Entity Name: SYNDEO OUTSOURCING, L.L.C.

Entity Type: DOM: LTD LIABILITY COMPANY

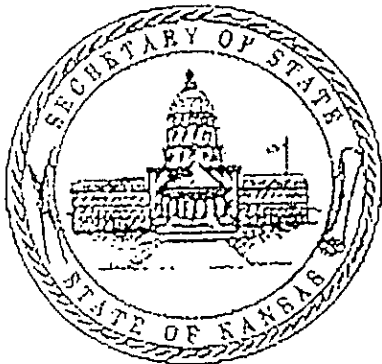
State of Organization: KS

Resident Agent: David M. Rapp

Registered Office: 1617 N Waterfront Parkway Suite 400, WICHITA, KS 67206

was filed in this office on July 02, 2002, 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 June 14, 2017

Kris W. Kobach

KRIS W. KOBACH
SECRETARY OF STATE

Certificate ID: 956252 - 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

August 24, 2017

TODD MATHENY
SYNDEO OUTSOURCING, LLC
3504 N GREAT PLAINS DR, STE. 200
WICHITA, KS 67220

SUBJECT: SYNDEO OUTSOURCING, L.L.C.
Ref. Number: W17000069759

We have received your document for SYNDEO OUTSOURCING, L.L.C. and your check(s) totaling \$798.75. 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: 517A00017465

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TALLAHASSEE, FLORIDA