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(Requestor's Name)						
(Address)						
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(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Cashess Entry Home)						
(Document Number)						
Certified Copies Certificates of Status						
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COVER LETTER

TO:		ati ∉ n Section n of Corporation	s					
SUBJE		Products LLC						
Name of Limited Liability Company								
The en- Exister	closed "A ice, and cl	pplication by Forcheck are submitted	eign Limited Liability Comp I to register the above refere	any for Authorizat aced foreign limite	ion to Trai d liability	nsact Business in Florida," Company to transact business	ertificate of s in Florida.	
Please	return all	correspondence co	oncerning this matter to the	following:				
		Andre Calixte						
	Name of Person							
	Warehouse Goods LLC							
	Firm/Company							
	6501 Park of Commerce Blvd, Suite 200							
Address								
	Boca Raton, FL 33487							
City/State and Zip Code								
acalixte@gnln.com								
		E-mail address: (to be used for future annual report notification)						
For fur	rther infor	mation concerning	g this matter, please call:					
Andre Calixte		561 at (503-428					
	Name of Contact Person		Area Code	Day	time 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					☐ \$160.00 Filing Fee, Cert of Status & Certified Copy			

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

IN COMPLIANCE WIN 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. QD Products LLC (Name of Foreign	Limited Liability Company; must include "U	mited 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 "Lin	mited Liability Company," "L.L.C," or "LLC,")			
2. Delaware		3				
(Jurisdiction under the law of w	chich foreign limited hability company is organized)	- ((FEI number, if applicable)			
4. N/A						
··	(Date first transacted business in Florida, if pri (See sections 605.0904 & 605.0905, F.S. to de	or to registration.) etermine penalty liability)				
5. 6501 Park of Commer	·		6501 Park of Commerce Blvd, Suite 200			
(Street Address of	Principal Office)	(Ma	iling Address)			
Boca Raton, FL 33487	1	Boca Raton, FL 3348	87 S S			
-						
			5 11			
7. Name and street addre	ess of Florida registered agent: (P.O.	Box <u>NOT</u> acceptable)	* 로 나			
Name:	Warehouse Goods LLC					
Name.			~ ~			
Office Address:	6501 Park of Commerce Blvd Suit					
	Boca Raton	, Florida 334	87			
	(City)		(Zip code)			
8. The name, title or cap Title or Capacity:	nacity and address of the person(s) when and Address:	ent's signature) no has/have authority to manage i Title or Capacity:	s/are: Name and Address:			
Aaron LoCascio, CE			6501 Park of Commerce Blvc			
Auton Eddiscid, CE	Suite 200	2	Suite 200			
	Boca Raton, FL 33487		Boca Raton, FL 33487			
						
(Use attachments if nece	essary)	_ 				
9. Attached is a certificat jurisdiction under the law of the translator must be	v of which it is organized. (If the certi	old, duly authenticated by the off ficate is in a foreign language, a	icial having custody of records in the translation of the certificate under oath			
10. This document is exe submitted in a document	cuted in accordance with section 608 to the Department of State constitutes	62(1) (b), Florida Statutes. I a a third degree felony as provided	im aware that any false information I for in s.817.155, F.S.			
	July!	nature of an authorized person				
	A A8	aminate of arthunorized person				
	Zachary Tapp, CFO					
		ped or printed name of signee				



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

DELAWARE, DO HEREBY CERTIFY THAT "QD PRODUCTS, LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR REVOKED SO FAR

AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO

TRANSACT BUSINESS.

THE FOLLOWING DOCUMENTS HAVE BEEN FILED:

CERTIFICATE OF FORMATION, FILED THE NINTH DAY OF JULY, A.D. 2014, AT 2:34 O'CLOCK P.M.

CERTIFICATE OF RESIGNATION OF APPOINTMENT, FILED THE FIFTEENTH

DAY OF JANUARY, A.D. 2016, AT 3:37 O'CLOCK P.M.

CERTIFICATE OF REVIVAL, FILED THE THIRTEENTH DAY OF SEPTEMBER,

A.D. 2017, AT 2:14 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID

CERTIFICATES ARE THE ONLY CERTIFICATES ON RECORD OF THE

AFORESAID LIMITED LIABILITY COMPANY, "QD PRODUCTS, LLC".

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



Authentication: 203256579

Date: 09-20-17