

1717000008489

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

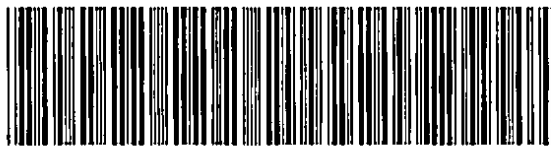
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

RT547
W17-74869

Office Use Only



900303301709

09/18/17--01012--017 **155.00

FILED
17 OCT -3 PM 2:03
DIVISION OF, STATE OF



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 19, 2017

ERIK DAY
20860 NW 2ND AVE
MIAMI, FL 33169

SUBJECT: FLEXWHEELS, LLC
Ref. Number: W17000074869

We have received your document for FLEXWHEELS, LLC and your check(s) totaling \$155.00. 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.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons
Regulatory Specialist II

Letter Number: 517A00019021

2017 OCT -3 AM 11:02

TALLAHASSEE, FL 32314

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FlexWheels, 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:

Erik Day

Name of Person

Luxury Automotive Transportation Services, LLC

Firm/Company

20860 NW 2nd Ave

Address

Miami, FL 33169

City/State and Zip Code

eday@warrenhenryauto.com

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

For further information concerning this matter, please call:

Erik Day

305
at ()

690-6073

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 605.0602, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. FlexWheels, LLC
(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. State of Delaware
(Jurisdiction under the law of which foreign limited liability company is organized)
3. _____
(FLL number, if applicable)
4. 09/05/2017
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905 F.S. to determine penalty liability)
5. 4645 Volunteer Rd, Davie, FL 33330
(Street Address of Principal Office)
6. 4839 SW 148th Ave., # 459, Davie, FL 33330
(Mailing Address)

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

Name: Erik Day

Office Address: 20860 N.W. 2nd Ave
Miami, Florida 33169
(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:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
MGR	<u>Warren H. Zinn</u> <u>20860 N.W. 2ND AVENUE</u> <u>MIAMI, FL 33169</u>		
MGR	<u>Erik Day</u> <u>20860 N.W. 2ND AVENUE</u> <u>MIAMI, FL 33169</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

Erik Day

Typed or printed name of signer

FILED
17 OCT -3 PM 2:03
CLERK OF COURT

Delaware

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FLEXWHEELS, 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 FIRST DAY OF SEPTEMBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FLEXWHEELS, LLC" WAS FORMED ON THE SEVENTEENTH DAY OF AUGUST, A.D. 2017.

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



A handwritten signature in black ink, appearing to read "JBullock", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 203155754

Date: 09-01-17

6514897 8300

SR# 20175981743

You may verify this certificate online at corp.delaware.gov/authver.shtml