

M17000008876

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

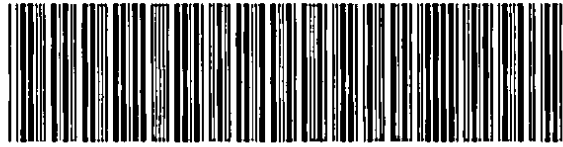
(Document Number)

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Special Instructions to Filing Officer:

NO RA W17-59757
1193.75

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07/17/17--01021--025 **160.00

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17 OCT 16 PM 2:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. WARREN

OCT 18 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 29, 2017

JIM POROSKY
4945 SCARLET LANE, UNIT 9
STOW, OH 44224

SUBJECT: TAYLOR TEAM RELOCATION, LLC
Ref. Number: W17000059757

We have received your document for TAYLOR TEAM RELOCATION, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this entity is liable for a civil penalty of at least \$500 but not more than \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification. In addition to this civil penalty, the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state are also due. The amount due this office to cover both annual report(s) and penalty fees is \$1193.75.

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.

Stacey M Warren
Regulatory Specialist II

Letter Number: 917A00014648



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 19, 2017

JIM POROSKY
4945 SCARLET LANE, UNIT 9
STOW, OH 44224

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Stacey M Warren
Regulatory Specialist II

Letter Number: 917A00014648

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Taylor Team Relocation LLC dba TTR Shipping

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:

Ellen Princic

Name of Person

Taylor Team Relocation LLC dba TTR Shipping

Firm/Company

4945 Scarlet Lane Unit 9

Address

Stow OH 44224

City/State and Zip Code

Ellen@ttrshipping.com

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

For further information concerning this matter, please call:

Ellen Princic

330

319-2926

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. Taylor Team Relocation LLC

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

TTR Shipping

(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. OH

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 73-1678292

(FBI number, if applicable)

4. October 1, 2012

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

5. 7658 Phillips Hwy #500

(Street Address of Principal Office)

Jacksonville FL 32256

6. 7658 Phillips Hwy #500

(Mailing Address)

Jacksonville FL 32256

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

Name: Registered Agents Inc.

Office Address: 3030 N. Rocky Point Drive STE 150A

Tampa

(City)

Florida 33607

(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.

Bill Hume
(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:
Accounting Manager	Ellen Princic 4945 Scarlet Lane #9 Stow OH 44224		
Risk Manager	James Porosky 4945 Scarlet Lane #9 Stow OH 44224		

(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.

Ellen Princic

(Signature of an authorized person)

Ellen Princic

(Typed or printed name of signer)

FILED
17 OCT 16 PM 2:51
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

UNITED STATES OF AMERICA
STATE OF OHIO
OFFICE OF THE SECRETARY OF STATE

I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show TAYLOR TEAM RELOCATION, LLC, an Ohio Limited Liability Company, Registration Number 1410211, was organized within the State of Ohio on September 8, 2003, is currently in FULL FORCE AND EFFECT upon the records of this office.



*Witness my hand and the seal of the
Secretary of State at Columbus, Ohio
this 18th day of September, A.D.
2013.*

Jon Husted

Ohio Secretary of State

Validation Number: 201326100333