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D SCOTT OCT 2 0 2017 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195	
REFERENCE : 874510 8035779	ı
AUTHORIZATION Spelle man	
COST LIMIT : \$125.00	
ORDER DATE: October 18, 2017	
ORDER TIME : 8:59 AM	
ORDER NO. : 874510-015	7. ~
CUSTOMER NO: 8035779	ALLAND OCT
FOREIGN FILINGS	SSEE P
NAME: TAMPA IBC, LLC	Q O J
XXXX QUALIFICATION (TYPE: <u>LL</u> )	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	
CERTIFIED COPY  XXX PLAIN STAMPED COPY  CERTIFICATE OF GOOD STANDING	
CONTACT PERSON: Roxanne Turner EXT# 62969	

EXAMINER:

## 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:

TAMPA IBC, LLC			
(Name of Foreign 1	imited Liability Company; must include "Lim	itled Liability Company, "L.I. C.," or "LI.C.")	
<u> </u>			
	me adopted for the purpose of transacting business in	Florida. The alternate name must include "Limited Liabo	hity Company," "L.L.C," or "LLC. 1
DELAWARE		3.	T, if applicable)
(Jurisdiction under the law of wh	sch foreign limited hability company is organized)	11 (.) (10.000)	ii, ii alphaesen i
	(Date first transacted business in Florida, if prior (See sections 605 0904 & 605 0905, F.S. to dete	to registration.) crusine penalty liability)	
5540 Fal	north Theat	6. 5540 Falure	ich solved
(Street Address of P	nncrpal Office)	(Mailing Address Acc. 7.	175)
Suft -	0/	7010	1 / 77128
Richmond	VA 132 30	Led - u. will	1/1 /31 /0
lame and street addres	s of Florida registered agent: (P.O. B	ox NOT acceptable)	
Name:	Corporation Service Company		
Office Address:	1201 Huys Street		
Office Address.	T. 11.	22201	
	Tallahassee (City)	, Florida 32301	<del></del>
The name, title or caps	Corporation Service Company By:  (Regusered agent (Regusered agent) (Regusered agent) (Regusered agent)	has/have authority to manage is/are:	Asst. Vice Pres
Title or Capacity:	Name and Address:	Title or Capacity:	
Munaĝe	Stevens 1. Suff 5540 Falmouth Sate 30 Richmond V.12	11 <u>9</u> . <u>31 30</u>	<u> </u>
			·
se attachments if neces	isary)		
Attached is a certificate risdiction under the law the translator must be s	of which it is organized. (If the certif	old, duly authenticated by the official haticate is in a foreign language, a translat	aving custody of records in the
This document is exect bmitted in a document to	o the Department of State constitutes	203 (1) (b), Florida Statutes, I am awar a third degree felony as provided for in DOLL DELLA unter of an authorized person	s.817.155, F.S.
	Stave	uz Wi. Sackler	

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Page 1

## Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TAMPA IBC, 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 NINETEENTH DAY OF OCTOBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TAMPA IBC, LLC" WAS FORMED ON THE EIGHTEENTH DAY OF OCTOBER, A.D. 2017.

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

Authentication: 203423100

Date: 10-19-17

6581731 8300 SR# 20176687202