M17000009212

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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FLORIDA DEPARTMENT OF STATE Division of Corporations

October 18, 2017

LEEANN WILLIFORD 4300 TBC WAY PALM BEACH GARDENS, FL 33410

SUBJECT: TIRE AMERICA, LLC Ref. Number: W17000083294

We have received your document for TIRE AMERICA, LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return 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.

Yasemin Y Sulker Regulatory Specialist II

Letter Number: 517A00021085

COVER LETTER

Registration Section Division of Corporations

TO:

UBJECT: _		Name of L	imited Liability Co	mpany			
he enclosed xistence, and	"Application by Fore I check are submitted	ign Limited Liability Compa to register the above referen	my for Authorizationced foreign limited	on to Trat I liability	nsact Business in Florida." Certificate company to transact business in Flor		
lease return a	all correspondence co	oncerning this matter to the f	ollowing:				
	LeeAnn Willif	ord					
		Na	me of Person				
	TBC Corpora	tion	_				
		Fir	m/Company				
	4300 TBC Wa	y					
			Address				
	Palm Beach Gardens, FL 33410						
		City/St	ate and Zip Code				
	lwillifordmeltze	-	Con Colonia amount a	inost not	(Gration)		
		E-mail address: (to be used	for future annual i	eport not	(ileation)		
or further in	iformation concerning	g this matter, please call:		202210	0 - 4125		
Lee	Ann Williford		561 at ()	0 x 4135		
_	Name o	f 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					
	a check for the follow \$125.00 Filing Fee	ing amount: \$\Pi\$ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Certified Copy	g Fee &	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy		

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

_i Tire America, LLC			
(Name of Loreign I	imited Liability Company; must include "L	imited Liability Company," "L.L.C.," or	**LL.C.**)
	me adopted for the purpose of transacting business	in Horida. The alternate name must include "Li	imited Fuhility Company," "L.I. C." or "Life"
If name unavaitable, enter afternate na s-Delaware	me adopted for the purpose of damacing monte	27-2536581	ļ
(Jurisdiction under the law of wh	ch foreign limited liability company is organized)		(EEI number, if applicable)
1			
	(Date first transacted business in Horida, if pr (See sections 605 0004 & 605 0005, F.S. to c	nor to registration) determine penalty liability)	
5 4300 TBC Way		6. 4300 TBC Way	lailing Address)
(Sireer Address of P Palm Beach Gardens, F	•	Palm Beach Garden	- ·
33410	·· <u> </u>	33410	
7. Name and street addres	\underline{s} of Florida registered agent: (P.O.	Box NOT acceptable)	
Name:	Corporation Service Company		
	1201 Hays Street		
Office Address:			201
Having been named as re designated in this applica to comply with the provis-	gistered agent and to accept servic tion, I hereby accept the appointm ions of all statutes relative to the pr s of my position as registered agen	ent as registered agent and agre roper and complete performance t	I limited liability company at the place to act in this capacity. I further as e of my duties, and I am familiar wit
designated in this applica to comply with the provis-	(Cay) tance: gistered agent and to accept servic tion, I hereby accept the appointm ions of all statutes relative to the pr s of my position as registered agen	e of process for the above stated ent as registered agent and agre roper and complete performance t	I limited liability company at the place to act in this capacity. I further as e of my duties, and I am familiar wit
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Typed or printed name of signer

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "TIRE AMERICA, 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 EIGHTEENTH DAY OF OCTOBER, A.D. 2017.

4821074 8300

SR# 20176673164

Date: 10-18;17

Authentication: 203422057