M17000009456

(Requ	uestor's Name)
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(City/	'State/Zip/Phone #)
☐ PICK-UP	WAIT MAIL
(Busi	iness Entity Name)
/Doci	ument Number)
(2000)	
Certified Copies	Certificates of Status
Special Instructions to Fi	iling Officer:
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	<i>,</i>
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10/19/17--01023--012 **125.00



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 20, 2017

MAUREEN JAMIESON 1265 LEAR INDUSTRIAL PARKWAY AVON, OH 44011 US

SUBJECT: ECOVERSE INDUSTRIES, LLC

Ref. Number: W17000083884

We have received your document for ECOVERSE INDUSTRIES, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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 the corrected original and one copy of 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) 254-6051.

Judy A Leggett Regulatory Specialist II Registration Section

Letter Number: 717A00021230

COVER LETTER

JBJECT:	ECOVERSE INDU	STRIES, LTD				
OBJECT: _	Name of Limited Liability Company					
he enclosed xistence, and	"Application by For I check are submitte	reign Limited Liability Comp d to register the above refer	oany for Authoriza enced foreign limi	ition to Tra ted liability	msact Business in Florida, company to transact busi	" Certifi ness in
ease return :	all correspondence o	concerning this matter to the	following:			
	MAUREEN JA	AMIESON				
		N'	ame of Person			-
	ECOVERSE I	NDUSTRIES, LTD				
		F	irm/Company		 	-
	1265 LEAR IN	DUSTRIALPARKWAY				Ï
		-	Address			-
	AVON, OH 44	011				
		City/S	tate and Zip Code	_		-
	MAUREEN@E	COVERSE.COM				
		E-mail address: (to be use	d for future annual	report not	ification)	,
or further inf	formation concernin	g this matter, please call;				
MA	UREEN JAMIESO:	×	216 at (937-32	25	
	Name c	of Contact Person	Area Code	Day	time Telephone Number	-
Divis Regi: P.O.	LING ADDRESS: sion of Corporations stration Section Box 6327 shassee, FL 32314			Division Registrat Clifton B 2661 Exe	CADDRESS: of Corporations ion Section uilding secutive Center Circle see, FL 32301	,
	check for the follow 25.00 Filing Fee	ing amount; □ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filin Certified Copy	ng Fee &	S160.00 Filing Fee, Cof Status & Certified Co	

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

•	TION 615.0902. FLORIDA STATUTES. THE ISINESS IN THE STATE OF FLORIDA:	E FOLLOWING IS SUBMITTED TO REGI	SIER A FOREIGN LIMÍTED LIABILITY
, ECOVERSE INDUSTI			
	ign Limited Liability Company; must inc	lude "Limited Liability Company," "L.L	.C.," or "LLC.")
ECOVERSE INDUSTRIE			
(If name unavailable, enter al Liability Company," "L.L.C."	ternate name adopted for the purpose of t "or "LLC.")	ransacting business in Florida. The altern	nate name must include "Limited
_{2.} ОНЮ	<u>:</u>	3. 45-5231110	
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if app	dicable)
4. 7/1/2015	_		1
	(Date first transacted business in (See sections 605,0904 & 605,0905)	Florida, if prior to registration.) i, F.S. to determine penalty liability)	
5. 1265 LEAR INDUSTR	RIAL PARKWAY		
AVON, OH 44011			
	(Street Address of Princi	ipal Office)	 '
6. 1265 LEAR INDUSTR	HAL PARKWAY		=
AVON, OH 44011			
	(Mailing Addre	ess)	ON -6 M
7. Name and street addres	s of Florida registered agent: (P.O. B	Box NOT acceptable)	
Name:	REGISTERED AGENTS INC		
Office Address:	3030 N. ROCKY POINT DRIVE, S	STE 150A	ORIO O
	ТАМРА	Florida 33607	
Registered agent's accep	(City)	(Zip co	ode)
Having been named as re designated in this applica- to complywith the provision	gistered agent and to accept service of tion, I hereby accept the appointment ons of all statutes relative to the proping position as registered agent.	it as registered agent and agree to a	ct in this capacity. I further agree
	(Registered	agent's signature)	
8. The name title or cans	icity and address of the person(s) who		
	JAMIESON (ADDRESS SAME AS	• •	
ACCOUNTANT DEVIN	CUNNINGHAM (ADDRESS SAMI	E AS ABOVE)	
OWNER HUGH FAGAN	(ADDRESS SAME AS ABOVE)		
9. Attached is a certificate jurisdiction under the law of the translator must be sa	of existence, no more than 90 days of of which it is organized. (If the certification)	ld, duly authenticated by the official cate is in a foreign language, a transl	ation of the certificate under oath
This document is executed submitted in a document to	in accordance with section 605.0203 the Department of State constitutes a MAUREEN JAMIESON	(1) (b), Florida Statutes. I am aware third degree felony as provided for i	that any false information n s.817.155, F.S.

Typed or printed name of signee

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 ECOVERSE INDUSTRIES, LTD., an Ohio For Profit Limited Liability Company, Registration Number 2102167, was organized within the State of Ohio on April 23, 2012, 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 1st day of November, A.D. 2017.

Ohio Secretary of State

Jon Hastel

Validation Number: 201730501648