M170000 1045a

(Ke	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
	usiness Entity Nar	
(50	isiness Littity Nai	110)
(D	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer	
	T ming omoci.	
		ľ
		ļ.
L		

Office Use Only



200303410422

09주화무르유큐선·102 ⁴류125.00

2117 b20 - 7 - K!! 7: 4:0

J. HARRIS

COVER LETTER

		stration Section sion of Corporation	os.				
SUBJEC		TrueNorth Texas, L.	.C.				
	-		Name of I	Limited Liability (Company		,
			eign Limited Liability Comp d to register the above refere				
Please re	eturn :	all correspondence e	oncerning this matter to the	following:			
		Randall Rings					
			Na	ine of Person			
		TrueNorth Texa	as , L.C.				
			Fir	ть/Сотрапу			
		500 1st Street S	E				
				Address			
		Cedar Rapids, I	A 52401				
			City/St	ate and Zip Code			
		rring@truenortho	ompanies.com				
		,	E-mail address: (to be used	for future annual	report not	fication)	
For furth	er int	formation concerning	g this matter, please call:				
	Rand	dall Rings		319 at (739-138	33	
		Name o	f Contact Person	Area Code	Dayı	time Telephone Number	
	Divis Regis P.O.	LING ADDRESS: sion of Corporations stration Section Box 6327 thassee, FL 32314			Division of Registrati Clifton Be 2661 Exec	ADDRESS: of Corporations on Section wilding cutive Center Circle ce, FL 32301	
		check for the follow: 25.00 Filing Fee	ing amount: \$\sum \\$130.00\ \text{Filing Fee & Certificate of Status}	□ \$155.00 Filin Certified Copy	ig Fee &	☐ \$160.00 Filing Fee, C of Status & Certified Co	



9.2017

FLORIDA DEPARTMENT OF STATE Division of Corporations

October 18, 2017

RANDALL RINGS 500 1ST STREET SE CEDAR RAPIDS, IA 52401

SUBJECT: TRUENORTH TEXAS, L.C.

Ref. Number: W17000075274

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

No description need in the name of the business. Just need acceptable suffix after L.C. such as L.C., LLC.

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.

Jenna D Harris Regulatory Specialist II

Letter Number: 017A00021075

2017 DEC -7 AM (9: 92 FALL AHASSER FLORED 2417 DEC - 7 AM 7: 40

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 TUMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

name unavailable, enter alternate	name adopted for the purpose of transacting business in	Florida. The alte	mate name must include "Limited Li	ability Company	/," "ILILC," a	r "11.C.")
Texas		3.	45-2811301			
(Jurisdiction under the law of	which foreign limited liability company is organized)			nber, if applicab	le)	
	(Date first transacted business in Florida, if pric (See sections 605.0904 & 605.0905, F.S. to det	r to registration.) ernanc penalty ha	ability)		vr-1	r~3
500 1st Street SE		6.	500 1st Street SE		1= #	
(Street Address of Cedar Rapids, IA 524	-		(Mailing Ad Dedar Rapids, IA 52401	dress)	~	() ())
Coddi rajina, iri bu i		<u>`</u>				ر <u>ت</u>
		_]
Name and street addre	ess of Florida registered agent: (P.O. F	ox <u>NOT</u> ac	ceptable)		,	至
Name:	Corporation Service Company					1
Natific.	•				- :	C
Office Address:	1201 Hays Street				,	
	Tallahassee		, Florida 32301 (Zip co			
esignated in this applic comply with the provi	egistered agent and to accept service of ation, I hereby accept the appointment sions of all statutes relative to the pro- purs of my position as registered agent.	t as register per and com	or the above stated limited ed agent and agree to ac	d liability c t in this cap	pacity. I j	further a
aving been named as i esignated in this applic comply with the provi	ptance: legistered agent and to accept service of ation, I hereby accept the appointmen sions of all statutes relative to the proj as of my position as registered agent.	t as register per and com	or the above stated limited ed agent and agree to ac	d liability c t in this cap	pacity. I j	further a
aving been named as i esignated in this applic comply with the provi nd accept the obligation	ptance: registered agent and to accept service ation, I hereby accept the appointment sions of all statutes relative to the projets of my position as registered agent. Corporation Service Company By: My Julius (Registered age	of as register over and com	or the above stated limited and agent and agree to acc plete performance of my	d liability c t in this cap	pacity. I j	further a
aving been named as i esignated in this applic comply with the provi nd accept the obligation	ptance: legistered agent and to accept service of ation, I hereby accept the appointmen sions of all statutes relative to the proj as of my position as registered agent.	of as register over and com nt's signature)	or the above stated limited and agent and agree to acc plete performance of my	d liability c t in this cap duties, and	pacity. I j	further a miliar wi
aving been named as it esignated in this applic comply with the providud accept the obligation. The name, title or cap	ptance: registered agent and to accept service action, I hereby accept the appointment sions of all statutes relative to the projects of my position as registered agent. Corporation Service Company By: Application (Registered agent accity and address of the person(s) who	of as register ner and com nt's signature) has/have au <u>Titl</u>	or the above stated limited and agent and agree to accepte performance of my atthority to manage is/are:	d liability of tin this cap duties, and	pacity. I j d I am fai	further a miliar wi
Taving been named as it esignated in this applicate of comply with the provint accept the obligation. The name, title or capacity:	ptance: registered agent and to accept service atton, I hereby accept the appointment sions of all statutes relative to the proposition as registered agent. Corporation Service Company By: (Registered agent) (Registered agent) Name and Address:	of as register ner and com nt's signature) has/have au <u>Titl</u>	or the above stated limited agent and agree to accuplete performance of my athority to manage is/are:	Name a Josh R. 500 1st	nacity. I j d I am fai	further a miliar wi ess:
Taving been named as it esignated in this applicate of comply with the provint accept the obligation. The name, title or capacity: Manager	ptance: registered agent and to accept service attion, I hereby accept the appointment sions of all statutes relative to the properties of my position as registered agent. Corporation Service Company By: (Registered agent) (Registered agent) accity and address of the person(s) who Name and Address: Duane J. Smith 500 1st Street SE	of as register over and com ont's signature) o has/have au Titl Ma	or the above stated limited agent and agree to acceptete performance of my atthority to manage is/are: e or Capacity:	Name : Josh R 500 1st Cedar	nacity. I j d I am far and Addr . Budke	further a miliar wi
Taving been named as it esignated in this applicate of comply with the provint accept the obligation. The name, title or capacity:	ptance: registered agent and to accept service attion, I hereby accept the appointment sions of all statutes relative to the projects of my position as registered agent. Corporation Service Company By: (Registered agent) (Registered agent) Duane J. Smith 500 1st Street SE Cedar Rapids, 1A 52401	of as register over and com ont's signature) o has/have au Titl Ma	or the above stated limited agent and agree to accuplete performance of my athority to manage is/are:	Name : Josh R 500 1st Cedar	and Addr Budke Street SE Rapids, IA	ess:
Taving been named as it esignated in this applicate of comply with the proving accept the obligation. The name, title or capacity: Manager Manager	ptance: registered agent and to accept service attion, I hereby accept the appointment sions of all statutes relative to the projects of my position as registered agent. Corporation Service Company By: (Registered agent) (Registered agent) accity and address of the person(s) who Name and Address: Duane J. Smith 500 1st Street SE Cedar Rapids, 1A 52401 Randall Rings 500 1st Street SE Cedar Rapids, 1A 52401	of as register over and com ont's signature) o has/have au Titl Ma	or the above stated limited agent and agree to acceptete performance of my atthority to manage is/are: e or Capacity:	Name : Josh R 500 1st Cedar	nacity. I j d I am far and Addr . Budke ! Street SE Rapids, IA	ess:
Taving been named as a sesignated in this applicate of comply with the proving accept the obligation. The name, title or capacity: Manager Manager Use attachments if necessity.	ptance: registered agent and to accept service attion, I hereby accept the appointment sions of all statutes relative to the projects of my position as registered agent. Corporation Service Company By: (Registered agent) (Registered agent) (Registered agent) Duane J. Smith 500 1st Street SE Cedar Rapids, IA 52401 Randall Rings 500 1st Street SE Cedar Rapids, IA 52401 ssary)	of as register ner and com nt's signature) has/have au Titl Ma	or the above stated limited agent and agree to acceptete performance of my athority to manage is/are: e or Capacity:	Name : Josh R 500 Ist Ccdar R. Bret 500 Ist Ccdar	and Addr Budke Street SE Rapids, IA	ess: 5 52401
Taving been named as a esignated in this applicate of comply with the proving accept the obligation. The name, title or capacity: Manager Manager Use attachments if necessary accepting a certificate.	ptance: registered agent and to accept service atton, I hereby accept the appointment sions of all statutes relative to the projects of my position as registered agent. Corporation Service Company By: (Registered agent) (Registered agent) (Registered agent) Duane J. Smith 500 1st Street SE Cedar Rapids, IA 52401 Randall Rings 500 1st Street SE Cedar Rapids, IA 52401 ssary) e of existence, no more than 90 days of	nt's signature) has/have au Titl Ma Ma	or the above stated limited agent and agree to acceptete performance of my athority to manage is/are: e or Capacity: nager	Name : Josh R 500 Ist Ccdar R. Bret 500 Ist Ccdar	and Addr Budke Street SE Rapids, LA	ess: 5 52401 ws 6 52401 ords in the
Taving been named as a esignated in this applicate of comply with the proving accept the obligation. The name, title or capacity: Manager Manager Use attachments if necessary accepting a certificate.	ptance: registered agent and to accept service attion, I hereby accept the appointment sions of all statutes relative to the projects of my position as registered agent. Corporation Service Company By: (Registered agent) (Registered agent) (Registered agent) Duane J. Smith 500 1st Street SE Cedar Rapids, 1A 52401 Randall Rings 500 1st Street SE Cedar Rapids. IA 52401 ssary) e of existence, no more than 90 days of the organized. (If the certifications)	nt's signature) has/have au Titl Ma Ma	or the above stated limited agent and agree to acceptete performance of my athority to manage is/are: e or Capacity: nager	Name : Josh R 500 Ist Ccdar R. Bret 500 Ist Ccdar	and Addr Budke Street SE Rapids, LA	ess: 5 52401 ws 6 52401 ords in the
Taving been named as a esignated in this applicate of comply with the proving accept the obligation. The name, title or capacity: Manager Manager Use attachments if necessarisdiction under the laws the translator must be	ptance: registered agent and to accept service attion, I hereby accept the appointment sions of all statutes relative to the projects of my position as registered agent. Corporation Service Company By: (Registered agent) (Registered agent) (Registered agent) Duane J. Smith 500 1st Street SE Cedar Rapids, IA 52401 Randall Rings 500 1st Street SE Cedar Rapids, IA 52401 ssary) e of existence, no more than 90 days of yof which it is organized. (If the certification)	nt's signature) has/have au Titl Ma Ma	or the above stated limited agent and agree to acceptete performance of my athority to manage is/are: e or Capacity: mager enticated by the official horeign language, a transla	Name a Josh R 500 Ist Cedar I aving custo	and Addr Budke Street SE Rapids, LA Street SE Rapids, LA	ess: 52401 ws cords in the under of
Taving been named as a esignated in this applicate of comply with the provint accept the obligation. The name, title or capacity: Manager Manager Use attachments if necessarisdiction under the law of the translator must be abmitted in a document is exceptionally.	ptance: registered agent and to accept service attion, I hereby accept the appointment sions of all statutes relative to the projects of my position as registered agent. Corporation Service Company By: (Registered agent) (Registered agent) (Registered agent) Duane J. Smith 500 1st Street SE Cedar Rapids, 1A 52401 Randall Rings 500 1st Street SE Cedar Rapids. IA 52401 ssary) e of existence, no more than 90 days of the organized. (If the certifications)	t as register over and com ht's signature) has/have au Titl Ma Ma Ma Ad, duly authorate is in a form	or the above stated limited agent and agree to acceptete performance of my athority to manage is/are: e or Capacity: mager enticated by the official horeign language, a transla	Name a Josh R 500 Ist Cedar I aving custo tion of the	and Addr Budke Street SE Rapids, LA and Matther Street SE Rapids, LA	ess: 52401 ws cords in the under of
Taving been named as a esignated in this applicate of comply with the provint accept the obligation. The name, title or capacity: Manager Manager Use attachments if necessarisdiction under the laws the translator must be continued. This document is executed.	ptance: registered agent and to accept service attion, I hereby accept the appointment sions of all statutes relative to the projects of my position as registered agent. Corporation Service Company By: (Registered agent)	t as register over and com ht's signature) has/have au Titl Ma Ma Ma Ad, duly authorate is in a form	or the above stated limited agent and agree to acceptete performance of my athority to manage is/are: e or Capacity: mager enticated by the official horeign language, a transla	Name a Josh R 500 Ist Cedar I aving custo tion of the	and Addr Budke Street SE Rapids, LA and Matther Street SE Rapids, LA	ess: 52401 ws cords in the under of

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for TrueNorth Texas, L.C. (file number 801446658), a Domestic Limited Liability Company (LLC), was filed in this office on June 30, 2011.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on September 07, 2017.





Rolando B. Pablos Secretary of State

Come visit us on the internet at http://www.sos.state.tx.us/
Phone: (512) 463-5555 Fax: (512) 463-5709 Dial: 7-1-1 for Relay Services
Prepared by: SOS-WEB TID: 10264 Document: 760394540003