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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

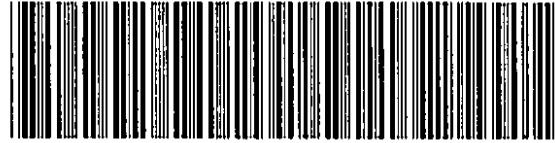
(Document Number)

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U.S. DISTRICT COURT
SOUTHERN DISTRICT OF FLORIDA

S. WARREN

JAN 03 2018



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 1, 2017

JULIE TANNER
230 DEER ISLAND ROAD
WINTER GARDEN, FL 34787

SUBJECT: MAKO INSURANCE AGENCY LLC
Ref. Number: W17000095427

We have received your document for MAKO INSURANCE AGENCY 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):

The registered agent must sign accepting the designation.

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: 817A00024289

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Mako Insurance Agency, LLC

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:

Julie Tanner

Name of Person

Broken Roads, LLC

Firm/Company

230 Deer Island Road

Address

Winter Garden, FL 34787

City/State and Zip Code

julie@makoinsure.com

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

For further information concerning this matter, please call:

Julie Tanner

407

866-3440

Name of Contact Person

at (_____) _____

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. Mako Insurance Agency, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC")
- (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. Wyoming 3. 82-3393231
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. 11/1/2017
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 230 Deer Island Road 6. 230 Deer Island Road
(Street Address of Principal Office) (Mailing Address)
Winter Garden, FL 34787 Winter Garden, FL 34787

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

Name: Julie Tanner

Office Address: 230 Deer Island Road

Winter Garden, Florida 34787
(City) (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.

(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>Julie Tanner, MGR</u>	<u>230 Deer Island Road</u> <u>Winter Garden, FL 34787</u>		

(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.

Signature of an authorized person

Julie Tanner

Typed or printed name of signer

STATE OF WYOMING
Office of the Secretary of State

I, ED MURRAY, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

Mako Insurance Agency LLC

is a

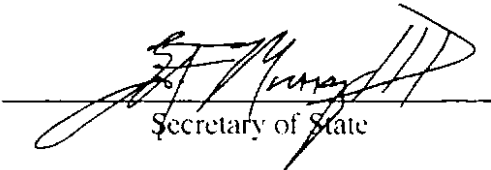
Limited Liability Company

formed or qualified under the laws of Wyoming did on **November 12, 2017** with a delayed effective date of November 13, 2017, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2017-000775894**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 27th day of November, 2017 at 9:39 AM. This certificate is assigned 024787228.




Secretary of State