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M. MILLIGAN JAN - 4 2018 18 JAN -4 AMIR: (
SECRETARY OF STAT

COVER LETTER

TO:

TO:	Registration Section Division of Corporation	s					
SUBJI	ABR3 Enterprises, L						
30041		Name of	Limited Liability C	Company	****		
The en Exister	closed "Application by Fornce, and check are submitted	eign Limited Liability Com d to register the above refer	pany for Authoriza renced foreign limit	tion to Tra ed liability	nsact Business in Florida," Ce company to transact business	rtificate of in Florida.	
Picase	return all correspondence c	oncerning this matter to the	following:				
	Arthur Riley						
		N	lame of Person				
	ABR3 Enterpris	ses, LLC					
	Firm/Company						
	95382 Santa Ju	ana Rd					
	Address						
	Fernandina Bea	ch FL 32034					
		City/S	State and Zip Code				
	roadranger7@gm	nail.com					
		E-mail address: (to be use	ed for future annual	report not	ification)		
For fu	rther information concernin	g this matter, please call:					
	Gail Riley		215 at (872-22	34		
	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			Division Registrat Clifton B 2661 Exc	of Corporations ion Section uilding centive Center Circle ee, FL 32301		
Enclos	sed is a check for the follow S125.00 Filing Fee	ing amount: \$\Bigsim \text{S130.00 Filing Fee & Certificate of Status}\$	☐ \$155.00 Filit Certified Copy	ng Fee &	☐ \$160.00 Filing Fee, Certi of Status & Certified Copy	ficate	

'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:

name unavailable, enter alternate r	name adopted for the purpose of transacting business in Flo	onda. The alternate name must include "Limited L	iability Company," "L.L.C," or "LLC.")
PA		3 20-3975978	
	hich foreign limited liability company is organized)	(FI:I mu	mber, if applicable)
01/02/2018			
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determ	registration.)	
95382 Santa Juana Rd	•	6 95382 Santa Juana Rd	
(Street Address of		(Mailing A	ddress)
Fernandina Beach FL	32034	Fernandina Beach FL 320	34 = 02 6
			三里 至 丁
Name and street address	ss of Florida registered agent: (P.O. Box	NOT_acceptable)	SSS L
	Gail Riley	•	
Name:	Can Kilvy		TES
Office Address:	95382 Santa Juana RD		MII: 31 OF STATE
	Fernandina Beach	. Florida <u>32034</u>	5 3 5 3
	(Cny)	. Florida	ode)
signated in this applica comply with the provis	otance: egistered agent and to accept service of ation, I hereby accept the appointment of ions of all statutes relative to the proper is of my position as registered agent.	is registered agent and agree to a	ct in this capacity. I further
signated in this applica comply with the provis	egistered agent and to accept service of ation, I hereby accept the appointment of ions of all statutes relative to the prope	is registered agent and agree to a r and complete performance of m	ct in this capacity. I further
signated in this applica comply with the provis id accept the obligation	egistered agent and to accept service of ation, I hereby accept the appointment of ions of all statutes relative to the properties of my position as registered agent. (Registered agent's	is registered agent and agree to as r and complete performance of m signature)	ct in this capacity. I further y duties, and I am familiar
signated in this applica comply with the provis id accept the obligation	egistered agent and to accept service of ation, I hereby accept the appointment of ions of all statutes relative to the properties of my position as registered agent.	is registered agent and agree to as r and complete performance of m signature)	ct in this capacity. I further y duties, and I am familiar
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Typed or printed name of signee

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

01/04/2018

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT.

ABR3 Enterprises, LLC

is duly registered as a Pennsylvania Limited Liability Company under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.

THE COUNTY OF THE CONTY OF THE

IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written

Acting Secretary of the Commonwealth

Robert Lunes

Certification Number: TSC180104080107-1

Verify this certificate online at http://www.corporations.pa.gov/orders/verify