

M18000000257

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

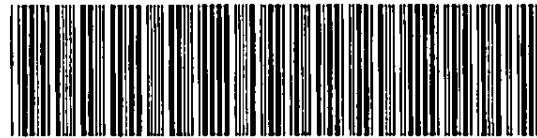
(Business Entity Name)

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J. LEGGETT
JAN 10 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Facciobene Industries 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:

Lisa Casamassima

Name of Person

Facciobene Industries LLC

Firm/Company

5055 Babcock St NE #4

Address

Palm Bay, FL 32905

City/State and Zip Code

Don@dfi-gc.com

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

For further information concerning this matter, please call:

Lisa Casamassima

321

727-7100

at (_____) _____

Name of Contact Person

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. Facciobene Industries 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. Delaware 3. 82-3385718
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. January 1, 2018
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 5055 Babcock St., NE #4 6. 5055 Babcock St., NE #4
(Street Address of Principal Office) (Mailing Address)
Palm Bay, FL 32905 Palm Bay, FL 32905

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

Name: Don Facciobene Inc.

Office Address: 5055 Babcock St NE #4

Palm Bay, Florida 32905
(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.

[Signature]
(Registered agent's signature)

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

Title or Capacity: Name and Address: Title or Capacity: Name and Address:

<u>Manager</u>	<u>Don A Facciobene</u>		
	<u>5055 Babcock St NE #</u>		
	<u>Palm Bay, FL 32905</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]
Signature of an authorized person

Don Facciobene, Manager

Typed or printed name of signee

FILED
JAN -9 AM 10
TALLAHASSEE FLORIDA

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FACCIOBENE INDUSTRIES, 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 THIRD DAY OF JANUARY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

A handwritten signature of Jeffrey W. Bullock in black ink, written over a horizontal line.

Jeffrey W. Bullock, Secretary of State

6609127 8300

SR# 20180039231

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 201911797

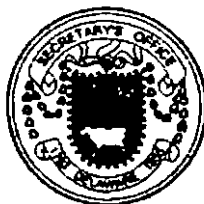
Date: 01-03-18

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT
COPY OF THE CERTIFICATE OF FORMATION OF "FACCIOBENE INDUSTRIES,
LLC", FILED IN THIS OFFICE ON THE NINTH DAY OF NOVEMBER, A.D.
2017, AT 10:01 O'CLOCK A.M.



6609127 8100
SR# 20177009880

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 203544889
Date: 11-09-17

State of Delaware
Secretary of State
Division of Corporations
Delivered 10:01 AM 11/09/2017
FILED 10:01 AM 11/09/2017
SR 20177009880 -- File Number 6609127

STATE OF DELAWARE
CERTIFICATE OF FORMATION
OF LIMITED LIABILITY COMPANY

The undersigned authorized person, desiring to form a limited liability company pursuant to the Limited Liability Company Act of the State of Delaware, hereby certifies as follows:

1. The name of the limited liability company is Facclobene Industries, LLC
2. The Registered Office of the limited liability company in the State of Delaware is located at 1209 Orange Street (street),
in the City of Wilmington, Zip Code 19801. The
name of the Registered Agent at such address upon whom process against this limited
liability company may be served is The Corporation Trust Company

By: [Signature]
Authorized Person

Name: John R. Kandlia
Print or Type