

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000021938 3)))



| То:    | Division of Corporations Fax Number : (850)617-6383   |             |                          |            |
|--------|---|-------------|--------------------------|------------|
| From:  | Account Name : REGISTERED AGE<br>Account Number : I20090000081<br>Phone : (307)200-2803<br>Fax Number : (855)330-1010 |             | FCEIV<br>JAN 18 20       |            |
|        |   |             |                          |            |
| annual | email address for this business e<br>report mailings. Enter only one  | email addre | e used for<br>ss please. | futu<br>** |
| annual | report mailings. Enter only one ddress:  Foreign Limited Liability  | email addre | e used for<br>ss please. | futu       |
| annual | report mailings. Enter only one   | email addre | e used for<br>ss please. | **         |
| annual | report mailings. Enter only one oddress:  Foreign Limited Liability:  L&I DETAILING, L                                | email addre | e used for ss please.    |            |
| annual | report mailings. Enter only one address:  Foreign Limited Liability  L&I DETAILING, L                                 | Company LC  | ss please.               |            |

Corporate Filing Menu

1/1

Electronic Filing Menu

Help

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

IN COMPLIANCE WITH SECTION 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

|  |  | nsacting business in Florida. The alternate na   | me must include "Limited  |
|--|--|--|---|
| .iability Company," "L.L.C,  |  |  |   |
| New York   | of which foreign limited liability   | N/A (FEI number, if applicable   | <u> </u>  |
| company is organized)  | or which foreign finance having  |  | ,   |
| . <u>N/A</u>   |  | ;  | <del>.</del>  |
|  | (Date first transacted business in F (See sections 605,0904 & 605,0905,  | londa, if prior to registration.) F.S. to determine penalty liability)   |   |
| 3030 N. Rocky Point  | Dr. Ste 150A, Tampa, FL 33607  |  | _   |
|  |  |  |   |
| <del></del>  | (Street Address of Princip   | al Office)   |   |
| 3030 N. Rocky Point  | _ + + (  |  |   |
|  |  |  | • • •   |
|  | (Mailing Addres  | s)   | ىق ، —  |
| Name and street address  | ss of Florida registered agent: (P.O. Bo   | x NOT acceptable)  | , <del>, , , , , , , , , , , , , , , , , , </del>   |
| <del>-</del>   |  |  | 143   |
| Name:  | Northwest Registered Agent, LLC  | <del></del>  | <br>C.  |
| Office Address:  | 3030 N. Rocky Point Dr. ST   | E 150A   | , 18  |
|  | Tampa  | , Florida 33607  |   |
|  | and the second s | (Zip code)   |   |
|  |  |  | reit.   |
| laving been named as re<br>lesignated in this applica<br>o complywith the provision  | stance: rgistered agent and to accept service of ution, I hereby accept the appointment ions of all statutes relative to the prope my position as registered agent.  | f process for the above stated limited lial as registered agent and agree to act in the and complete performance of my duties  | his capacity. I further a   |
| laving been named as re<br>lesignated in this applica<br>o complywith the provision  | stance: rgistered agent and to accept service of ution, I hereby accept the appointment ions of all statutes relative to the prope my position as registered agent.  | as registered agent and agree to act in to   | his capacity. I further a   |
| laving been named as re<br>lesignated in this applica<br>o complywith the provisi<br>occept the obligations of i   | stance: rgistered agent and to accept service of ution, I hereby accept the appointment ions of all statutes relative to the prope my position as registered agent.  | as registered agent and agree to act in to and complete performance of my dution of | his capacity. I further a   |
| Taving been named as re<br>lesignated in this applica<br>o complywith the provisi<br>accept the obligations of a   | otance: registered agent and to accept service of ation, I hereby accept the appointment ions of all statutes relative to the prope my position as registered agent.  (Registered agent) acity and address of the person(s) who  | as registered agent and agree to act in to and complete performance of my dution of | his capacity. I further a   |
| Having been named as re<br>designated in this applica<br>o complywith the provisi<br>accept the obligations of a<br>S. The name, title or caps   | otance: registered agent and to accept service of ation, I hereby accept the appointment ions of all statutes relative to the prope my position as registered agent.  (Registered agent) acity and address of the person(s) who  | as registered agent and agree to act in to a rand complete performance of my dutic gent's signature)  has/have authority to manage is/are:   | his capacity. I further a   |
| Having been named as re<br>lesignated in this applica<br>o complywith the provision<br>recept the obligations of a   | otance: registered agent and to accept service of ation, I hereby accept the appointment ions of all statutes relative to the prope my position as registered agent.  (Registered agent) acity and address of the person(s) who  | as registered agent and agree to act in to a rand complete performance of my dutic gent's signature)  has/have authority to manage is/are:   | his capacity. I further a   |
| Taving been named as re<br>lesignated in this applica<br>o complywith the provisi<br>accept the obligations of a   | otance: registered agent and to accept service of ation, I hereby accept the appointment ions of all statutes relative to the prope my position as registered agent.  (Registered agent) acity and address of the person(s) who  | as registered agent and agree to act in to a rand complete performance of my dutic gent's signature)  has/have authority to manage is/are:   | his capacity. I further a   |
| designated in this application complywith the provision comply with the provision coupt the obligations of the same, title or capa Austin Frye, Member 20. Attached is a certificate   | otance: registered agent and to accept service of ution, I hereby accept the appointment ions of all statutes relative to the prope my position as registered agent.  (Registered ag acity and address of the person(s) who er, 3030 N. Rocky Point Drive e of existence, no more than 90 days old of which it is organized. (If the certific abmitted)  | as registered agent and agree to act in the rand complete performance of my dution gent's signature) has/have authority to manage is/are:  Ste 150A, Tampa, FL 33607  I, duly authenticated by the official having ate is in a foreign language, a translation   | his capacity. I further a es, and I am familiar wit  g custody of records in the of the certificate under o |
| Having been named as relesignated in this applica o complywith the provision comply with the provision coupt the obligations of the same title or capa Austin Frye, Member 20. Attached is a certificate urisdiction under the law | otance: registered agent and to accept service of ution, I hereby accept the appointment ions of all statutes relative to the prope my position as registered agent.  (Registered ag acity and address of the person(s) who er, 3030 N. Rocky Point Drive e of existence, no more than 90 days old of which it is organized. (If the certific abmitted)  | as registered agent and agree to act in the rand complete performance of my dution gent's signature) has/have authority to manage is/are:  Ste 150A, Tampa, FL 33607   | his capacity. I further a cs, and I am familiar when the control of the certificate under o                 |

Typed or printed name of signee

Morgan Noble

## State of New York Department of State } ss

I hereby certify, that L&I DETAILING, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 12/13/2012, and that the Limited Liability Company is existing so far as shown by the records of the Department.



Witness my hand and the official seal of the Department of State at the City of Albany, this 17th day of January two thousand and eighteen.

Brendan W. Fitzger: ld

**Executive Deputy Secretary of State** 

201801180375 · MG

For  $J(\omega) = J$ 

 $\cdot_{i^{\sharp}}$