

M18000002054

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

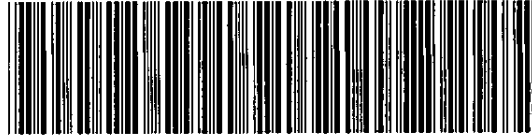
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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DEPARTMENT OF STATE

18 FEB 12 AM 10:19

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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J. HARRIS

801111 8144

**FLORIDA FILING & SEARCH SERVICES, INC.**

**P.O. BOX 10662 TALLAHASSEE, FL 32302  
155 Office Plaza Dr Ste A Tallahassee FL 32301  
PHONE: (800) 435-9371; FAX: (866) 860-8395**

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**DATE: 2/12/18**

**NAME: I.F. ROOKS & ASSOCIATES, LLC**

**TYPE OF FILING: APPLICATION**

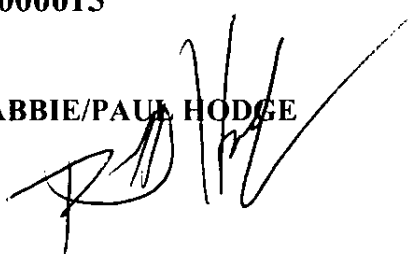
**COST: 155.00**

**RETURN: CERTIFIED COPY PLEASE**

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**ACCOUNT: FCA000000015**

**AUTHORIZATION: ABBIE/PAUL HODGE**

A handwritten signature in black ink, appearing to be 'Abbie/Paul Hodge', is written over the printed name. The signature is stylized with a large 'A' and a checkmark-like flourish.



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 13, 2018

FLORIDA FILING & SEARCH SERVICES  
PAUL HODGE

SUBJECT: I.F. ROOKS & ASSOCIATES, LLC  
Ref. Number: W18000014168

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2018 FEB 12 AM 8:35  
TALLAHASSEE, FLORIDA

We have received your document for I.F. ROOKS & ASSOCIATES, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.," also are no longer acceptable.

The document number of the name conflict is 336613.

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: 118A00002971

*Please keep original file date  
(if possible). Thank you!*

[www.sunbiz.org](http://www.sunbiz.org)

**I.F. ROOKS & ASSOCIATES, INC.**  
106 NW DRANE ST  
PLANT CITY, FL 33563

February 23, 2018

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: **Consent to Use Name I.F. ROOKS & ASSOCIATES, LLC**

Ladies and Gentlemen:

I.F. Rooks & Associates, Inc., a corporation organized under the laws of the State of Florida (document number 336613), is filing Articles of Amendment to its Articles of Incorporation to change its name to "IFR Holdings, Inc." and has consented to the use of the name "I.F. Rooks & Associates, LLC" by the Tennessee limited liability company intending to qualify to do business in the State of Florida.

I.F. ROOKS & ASSOCIATES, INC.

By: 

Ed Rooks, Vice President

**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. I.F. Rooks & Associates, 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. Tennessee 3. \_\_\_\_\_  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

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

5. 813 Ridge Lake Boulevard 6. 813 Ridge Lake Boulevard  
(Street Address of Principal Office) (Mailing Address)  
Suite 400  
Memphis, TN 38120 Memphis, TN 38120

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

Name: Paracorp Incorporated  
Office Address: 155 Office Plaza Drive, 1st Floor  
Tallahassee, Leon County, Florida 32301  
(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)

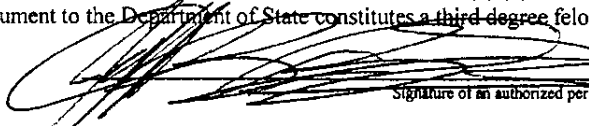
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>Chairman</u>	<u>Jeffrey B. Presley</u> <u>813 Ridge Lake Boulevard</u> <u>Memphis, TN 38120</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

Jeffrey B. Presley, Chairman

\_\_\_\_\_  
Typed or printed name of signee

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**STATE OF FLORIDA**  
**REGISTERED AGENT CONSENT FORM**

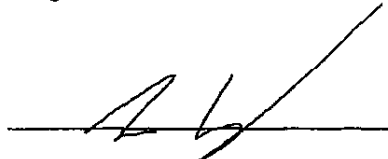
**DATE:** 02/09/2018

**ENTITY NAME:** I.F. Rooks & Associates, LLC

**REGISTERED AGENT NAME AND ADDRESS:**

Paracorp Incorporated  
155 Office Plaza Drive, 1st Floor  
Tallahassee, FL 32301

Paracorp Incorporated, having been designated to act as Statutory Agent, hereby consents to act in the capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statutes.



Milton Vong , Assistant Secretary  
Paracorp Incorporated

2018 FEB 12 AM 8:34  
FILED

FILED



**Tre Hargett**  
Secretary of State

**Division of Business Services**  
**Department of State**  
State of Tennessee  
312 Rosa L. Parks AVE, 6th FL  
Nashville, TN 37243-1102

**PARASEC**  
2804 GATEWAY OAKS DR STE 100  
SACRAMENTO, CA 95833

February 9, 2018

**Request Type: Certificate of Existence/Authorization**  
Request #: 0266246

Issuance Date: 02/09/2018  
Copies Requested: 1

**Document Receipt**

Receipt #: 003807187

Filing Fee: \$20.00

Payment-Credit Card - State Payment Center - CC #: 3721331073

\$20.00

**Regarding: I.F. Rooks & Associates, LLC**  
Filing Type: Limited Liability Company - Domestic  
Formation/Qualification Date: 02/07/2018  
Status: Active  
Duration Term: Perpetual  
Business County: SHELBY COUNTY

Control #: 945630  
Date Formed: 02/07/2018  
Formation Locale: TENNESSEE  
Inactive Date:

**CERTIFICATE OF EXISTENCE**

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

**I.F. Rooks & Associates, LLC**

- \* is a Limited Liability Company duly formed under the law of this State with a date of incorporation and duration as given above;
- \* has paid all fees, interest, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;
- \* has appointed a registered agent and registered office in this State;
- \* has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Tre Hargett  
Secretary of State

Processed By: Cert Web User

Verification #: 026367633