

116000003114

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

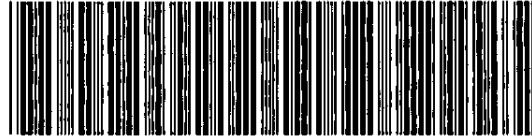
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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MAR 12 2018

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2018 MAR 30 A 11:37

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 14, 2018

ROBENETTE Y ROSENBERGER
6200 E HWY 62, BLDG. 2501, SUITE 300
JEFFERSONVILLE, IN 47130

SUBJECT: HYDROBLASTERS SE, LLC
Ref. Number: W18000024747

We have received your document for HYDROBLASTERS SE, 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 designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

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.

Dionne M Scott
Regulatory Specialist II

Letter Number: 018A00005140

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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. Hydroblasters SE, 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. Indiana 3. 35-2146211
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. March 12, 2018
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 6200 E. Hwy 62, Bldg. 2501, Suite 300 6. _____
(Street Address of Principal Office) (Mailing Address)
Jeffersonville, IN 47130

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

Name: Registered Agent Solutions, Inc.

Office Address: 155 Office Plaza Drive, Suite A

Tallahassee, 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.

Adam Soldano, Asst. Secretary
(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>CEO</u>	<u>James P. Hughes</u> <u>6200 E. Hwy 62</u> <u>Bldg. 2501 Suite 300</u> <u>Jeffersonville, IN 47130</u>	<u>Secretary</u>	<u>Robenette Y. Rosenberger</u> <u>6200 E. Hwy 62</u> <u>Bldg. 2501, Suite 300</u> <u>Jeffersonville, IN 47130</u>
<u>President</u>	<u>Jeffery S. Hughes</u> <u>6200 E. Hwy 62</u> <u>Bldg. 2501 Suite 300</u> <u>Jeffersonville, IN 47130</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.

Robenette Y. Rosenberger
Signature of authorized person

Robenette Y. Rosenberger, Secretary

Typed or printed name of signee

State of Indiana
Office of the Secretary of State

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

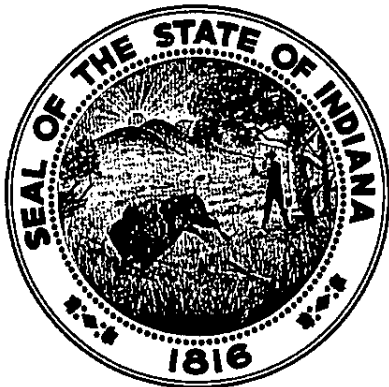
I, CONNIE LAWSON, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

HYDROBLASTERS SE, LLC

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on July 12, 2001, and was in existence or authorized to transact business in the State of Indiana on March 09, 2018.

I further certify this Domestic Limited Liability Company has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution, or expiration has been filed or taken place. All fees, taxes, interest, and penalties owed to Indiana by the domestic or foreign entity and collected by the Secretary of State have been paid.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, March 09, 2018

Connie Lawson

CONNIE LAWSON
SECRETARY OF STATE

2001071200649 / 2018555488

Verify this certificate: <https://bsd.sos.in.gov/ValidateCertificate>

FILED
MAR 30 AM 11:37
CLERK OF THE
SOS OFFICE