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(Re	equestor's Name)				
(Ad	ldress)				
(Ac	ldress)				
(Cir	ty/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer:					

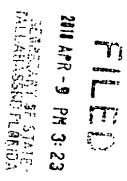
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J. HARRIS

COVER LETTER

TO: Registration Section Division of Corporation	s				
SUBJECT:	Superior Coa	tings Ll	Company		
The enclosed "Application by Fore Existence, and check are submitted	eign Limited Liability Comp. I to register the above refere	any for Authorizat	tion to Tran ed liability	sact Busines	s in Florida," Certificate of transact business in Florida.
Please return all correspondence c	oncerning this matter to the	following:			
	Caroline Na	Thomas			
Superior Coatings LLC Firm/Company					
	Fin	m/Company	J		
Z92 Main ST # 299 Address					
	Harleyson	6 PA	19432	3	
Harleysullo PA 19438 City/State and Zip Code					
Capoline QS uperior coatingsing. con E-mail address: (to be used for future annual report notification)					
For further information concerning			•	·	
<u> (aroline</u> Name o	Thomas Contact Person	at (Z/5 Area Code) <u>35</u> Dayti	3 - 75 ime Telepho	/2 ne Number
	• • • • • • • • • • • • • • • • • • • •				
MAILING ADDRESS: Division of Corporations			Division o	ADDRESS: f Corporatio	ns
Registration Section P.O. Box 6327			Registration Bu		
Tallahassee, FL 32314			2661 Exec	utive Center e, FL 32301	1
Enclosed is a check for the follow	ing amount:				
□ \$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	S155.00 Filin Certified Copy	ig Fee &		Filing Fee, Certificate Certified Copy



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 29, 2018

CAROLINE THOMAS 292 MAIN ST #299 HARLEYVILLE, PA 19438

SUBJECT: SAFETCLEAR COATINGS LLC

Ref. Number: W18000015854

DEPARTMENT OF STATE DEVISION OF CORPORATE TALL AHASSEE, FLOAT

RECEIVED 2018 APR -9 PM 12: 12

We have received your document for SAFETCLEAR COATINGS LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The alternate name that you have chosen is not available. Please select a new name.

The document number of the name conflict is L17000024027.

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: 418A00006328

Tha

www.sunbiz.org

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FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED 2018 MAR 28 PM 12: 29

DEFARTMENT OF STATE DIVIS ON OF CORPORATION TALLAHASSEE, FLORES

March 14, 2018

CAROLINE THOMAS 292 MAIN ST #299 HARLEYVILLE, PA 19438

SUBJECT: SAFETCLERA COATINGS LLC

Ref. Number: W18000015854

We have received your document for SAFETCLERA COATINGS LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The alternate name that you have chosen is not available. Please select a new name.

The document number of the name conflict is L17000024027.

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: 018A00005160



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 16, 2018

CAROLINE THOMAS 292 MAIN ST #299 HARLEYVILLE, PA 19438 RECEIVED

SUBJECT: SUPERIOR COATINGS, LLC

Ref. Number: W18000015854

We have received your document for SUPERIOR COATINGS, LLC and check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$72.50. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

The form you submitted is for a Corporation, but your entity is a LLG. Please complete and return the enclosed blank form(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 539105.

The registered agent must sign accepting the designation.

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

SUPERIOR COATINGS

March 23, 2018

Florida Department of State
Division of Corporations
2661 W Executive Center Circle
Clifton Building
Tallahassee. FL 32301-5020

Attn: Jenna D Harris, Regulatory Specialist II

Jenna,

Please accept this letter as consent to use the Florida LLC named SafeTclear Coatings LLC as the alternate name for Superior Coatings LLC, foreign limited liability company requesting authorization to transact business in Florida.

SafeTclearcoatings LLC is owned by myself, and a single member LLC. Superior Coatings LLC is also owned by myself, and is a Pennsylvania LLC listed on the attached Florida application. I have included a copy of my articles of organization for Florida limited liability company for you to review and reference.

Please advise if anything else is needed to process this for Superior Coatings LLC.

Sincerely

Caroline Thomas

caroline@superiorcoatingsinc.com

215-353-7512

800-215-0450 x1



APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRAINING IN FLORIDA	NSACT BUSINESS
IN COMPLANCE WITH SECTION 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FORESCOMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	GN LIMITED LIABILITY
1. Superior Coatings LLC (Name of Foreign Limited Liability Company, myst include "Limited Liability Company," "LLC." or "LLC.")	
(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "L.L.C.," or "L.L.C.,"	
SAfetClour Coutings LLC (H'nume univaliable, enter alternate rame adopted for the purpose of transporting business in Florida. The alternate rame must include "Limited Liability Company.	
(If name unwailable, enter alternate rame adopted for the purpose of transsoring business in Florida. The alternate rame must include "Limited Liability Company.	""E.L.C," or "LLC" (
2. PA (Narisduction under the law of which foreign limited liability company is organized) 3. 81-5421019 (FEI number, it applicable	<u> </u>
(All Substitutions (affect the law of whiter foreign inflicent months) company is originally as orig	
4	
(Date first transacted business in Florich, if prior to registration.) (See sections 605 0904 & 605 0905, F.S. to determine penalty liability)	
5. 292 Main ST #299 6. (Street Address of Principal Office) His: Ley Sills PA 19438	·
(Street Adaress of Prumpel Office) (Mailing Address)	
Ha: 129571C. P/1 17938	
	⊼ ≥
7. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)	
Name: Caroline Thomas	
Office Address: 4504 Spruce ST	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Office Address:	<i>∞</i>
TampA , Florida 33407 (City)	
Registered agent's acceptance:	ာ်က မ
Having been named as registered agent and to accept service of process for the above stated limited liability codesignated in this application, I hereby accept the appointment as registered agent and agree to act in this cap to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and accept the obligations of my position as registered agent.	acit y, T furthe) agree
(Registered agern's signature)	
(Kegiotetet) agent a signature)	
S. 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:	nd Address:

President Carrie Thomas Prayect Nigr. WALL	Yan ST #299
TampA I=L 33007 Hugles	15-16 FA 19438
′	
	
(Use attachments if necessary)	
 Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custod jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the c 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 f submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155.	
Signature of an authorized person	
Typed or printed name of signee	

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE 02/02/2018

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

Superior Coatings, 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 COLUMN OF TH

IN TESTIMONY WHEREOF, I have hereinto 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

Certification Number: TSC180202131161-1

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