



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 22, 2018

PAMELA URAN
STINSON LEONARD ST LLP
50 S 6TH ST, SUITE 2600
MINNEAPOLIS, MN 55402

SUBJECT: FLOWTABLES, LLC
Ref. Number: W18000058344

We have received your document for FLOWTABLES, 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 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
Regulatory Specialist II

Letter Number: 718A00013072

RECEIVED
2018 JUL -9 PM 12:36
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL



Pamela J. Uran
612.335.1633 DIRECT
612.335.1657 DIRECT FAX
pam.uran@stinson.com

July 1, 2018

Florida Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: FLOWTABLES, LLC - Application for Certificate of Authority

Dear Sir/Madam:

Enclosed for filing with your office is a copy of your correspondence dated June 22 and the revised Application by Foreign Limited Liability Company for Authorization to Transact Business.

I trust that you will be able to complete the registration of the entity with this revised Application. Once filed, please return a file stamped copy of the application in the enclosed self-addressed envelope.

If you have any questions, please do not hesitate to contact the undersigned. Thank you for your assistance with this matter.

Sincerely,

Stinson Leonard Street LLP

A handwritten signature in black ink, appearing to read "Pamela J. Uran", written in a cursive style.

Pamela J. Uran
Paralegal

/pju

Enclosures

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: FLOWTABLES, 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:

Pamela Uran

Name of Person

Stinson Leonard Street LLP

Firm/Company

50 S 6th Street, Suite 2600

Address

Minneapolis, MN 55402

City/State and Zip Code

knightbarrys@gmail.com

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

For further information concerning this matter, please call:

Pamela Uran

612

335-1633

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. **FLOWTABLES, 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**

(Jurisdiction under the law of which foreign limited liability company is organized)

3. _____

(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. **1900 Consulate Place**

(Street Address of Principal Office)

Apt. 2102

West Palm Beach, FL 33401

6. **1900 Consulate Place**

(Mailing Address)

Apt. 2102

West Palm Beach, FL 33401

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

Name: Barry Knight

Office Address: 1900 Consulate Place, Apt. 2102

West Palm Beach

(City)

Florida 33401

(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:

Title or Capacity:

Name and Address:

Title or Capacity:

Name and Address:

President/CFO

Barry S. Knight

1900 Consulate Pl. Apt 2102
West Palm Beach, FL 33401

(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 authorized person)

Barry S. Knight

Typed or printed name of signer

FILED
JUL - 8 PM 3:54
CLERK OF DISTRICT COURT
U.S. DISTRICT COURT
SOUTHERN DISTRICT OF FLORIDA

Delaware

The First State

Page 1


I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FLOWTABLES, 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 TWENTIETH DAY OF JUNE, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FLOWTABLES, LLC" WAS FORMED ON THE ELEVENTH DAY OF JUNE, A.D. 2018.

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

FILED
18 JUL -9 PM 3:54
SECRETARY OF STATE
CORPORATION DIVISION




Jeffrey W. Bullock, Secretary of State

6927238 8300

SR# 20185256737

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

Authentication: 202919207

Date: 06-20-18