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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

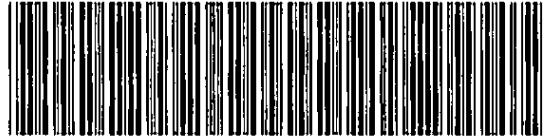
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18 JUN 23 AM 11:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. SIMMONS

JUL 25 2018



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 3, 2018

ROBERT SHIPLEY
3908 SABAL WAY
FORT PIERCE, FL 34981

SUBJECT: SHIPLEY LOGISTICS LLC
Ref. Number: W18000043201

We have received your document for SHIPLEY LOGISTICS 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):

Fiance isn't an acceptable title for Dana Lamplough.

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: 918A00013747

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RECEIVED

2018 JUL 23 AM 11:07

Division of Corporations
Tallahassee, Florida



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 13, 2018

ROBERT SHIPLEY
3908 SABAL WAY
FORT PIERCE, FL 34981

SUBJECT: SHIPLEY LOGISTICS LLC
Ref. Number: W18000043201

We have received your document for SHIPLEY LOGISTICS LLC and your check(s) totaling \$. 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.

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

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: 618A00012339

RECEIVED
2018 JUN 28 AM 10:19
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL

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. Shipley Logistics 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. MD
(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. 3908 Sabal Way
(Street Address of Principal Office)
Fort Pierce, FL 34981

6. 3908 Sabal Way
(Mailing Address)
Fort Pierce, FL 34981

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

Name: Dana Lamplough

Office Address: 3908 Sabal Way
Fort Pierce, Florida 34981
(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.

[Signature]
(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:
<u>COO</u> <u>Chief operating officer</u>	<u>Dana Lamplough</u> <u>3908 Sabal Way</u> <u>Ft. Pierce, FL 34981</u>	_____	_____
<u>Owner/President</u>	<u>Robert Shipley</u> <u>3908 Sabal Way</u> <u>Fort Pierce, FL 34981</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]
(Signature of an authorized person)
Robert Shipley
(Typed or printed name of signee)

STATE OF MISSOURI



John R. Ashcroft
Secretary of State

CORPORATION DIVISION
CERTIFICATE OF GOOD STANDING

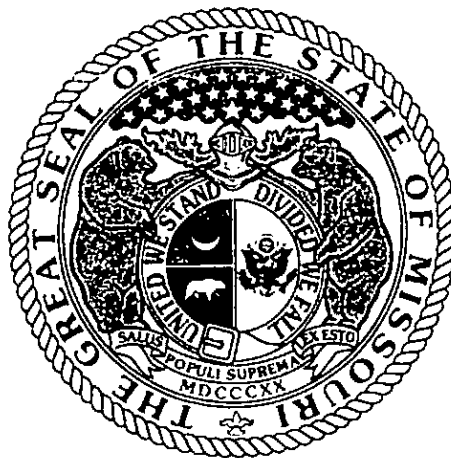
I, JOHN R. ASHCROFT, Secretary of State of the STATE OF MISSOURI, do hereby certify that the records in my office and in my care and custody reveal that

Shipley Logistics LLC
LC001578274

was created under the laws of this State on the 22nd day of February, 2018, and is active, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 27th day of April, 2018.


Secretary of State



Certification Number: CERT-04272018-0036