

MI8000006859

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

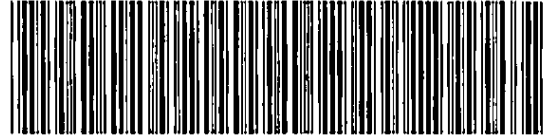
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2018 JUL 19 PM 4:42  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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JUL 26 2018



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 21, 2018

MARK CASEY  
511 S. MAGNOLIA AVE  
SANFORD, FL 32771

SUBJECT: M AND E HOLDINGS LLC  
Ref. Number: W18000066652

We have received your document for M AND E HOLDINGS 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 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 "LLC" and "Co.," also are no longer acceptable.

The document number of the name conflict is P97000035519, L05000051754, L07000060857.

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.

Deborah Bruce  
Corporate Records Supervisor

Letter Number: 718A00014996

STATE OF FLORIDA  
TALLAHASSEE  
DIVISION OF CORPORATIONS

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COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: M and E Holdings 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:

Mark Casey  
Name of Person

M and E Holdings LLC  
Firm/Company

511 S. Magnolia Ave  
Address

Sanford FL 32771  
City/State and Zip Code

mc Casey9033@aol.com  
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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For further information concerning this matter, please call:

Mark Casey at (360) 259-9383  
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. M and E Holdings LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
2. M and E Holdings of Sanford 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.")
3. Washington State      3. 46-5638537  
(Jurisdiction under the law of which foreign limited liability company is organized)      (FEI number, if applicable)
4. July 5<sup>th</sup> 2018  
(Date first transacted business in Florida, if prior to registration)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 2608 Scottlac Dr sw      6. 511 S Magnolia Ave  
(Street Address of Principal Office)      (Mailing Address)
- Olympia WA 98512      Sanford FL 32771

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

Name: Mark Casey  
Office Address: 511 S Magnolia Ave  
Sanford FL 32771, Florida 32771  
(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.

Mark Casey  
(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>Manager</u>	<u>Mark Casey</u> <u>511 S Magnolia Ave</u> <u>Sanford FL 32771</u>	
<u>Member/manager</u>	<u>Elizabeth Casey</u> <u>2608 Scottlac Dr SW</u> <u>Olympia WA 98512</u>	

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(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.

Mark Casey  
Signature of an authorized person

Mark Casey  
Typed or printed name of signer

UNITED STATES OF AMERICA

# The State of Washington



Secretary of State

I, KIM WYMAN, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

## CERTIFICATE OF EXISTENCE

OF

MANDE HOLDINGS LLC

I CERTIFY that the records on file in this office show that the above named entity was formed under the laws of the State of Washington and that its public organic record was filed in Washington and became effective on 03/18/2014.

I FURTHER CERTIFY that the entity's duration is Perpetual, and that as of the date of this certificate, the records of the Secretary of State do not reflect that this entity has been dissolved.

I FURTHER CERTIFY that all fees, interest, and penalties owed and collected through the Secretary of State have been paid.

I FURTHER CERTIFY that the most recent annual report has been delivered to the Secretary of State for filing and that proceedings for administrative dissolution are not pending.

Issued Date: 06/29/2018  
UBI Number: 603 385 445



Given under my hand and the Seal of the State  
of Washington at Olympia, the State Capital

Handwritten signature of Kim Wyman in cursive script.

Kim Wyman, Secretary of State

Date Issued: 06/29/2018