

m18 0000 07139

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

W18-608109

(Document Number)

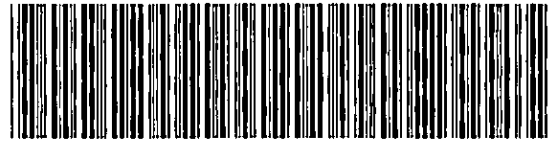
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Registrations
CGS

Office Use Only

M MOON
JUN 29 2018



400315145384

701
LLC

M18-7139

08/10/18--01030--003 **72.50

08/28/18--01019--002 **87.50

FILED
SECTION 1
2018 AUG -1 AM 10:56

N. CAUSSEAU

AUG 3 2018

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Lake Country Fracwater Specialists, 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:

Frank Miller

Name of Person

Lake Country Fracwater Specialists, LLC

Firm/Company

5568 Woodbine Rd.

Address

Pace, Florida 32571

City/State and Zip Code

fcmiller@lwaterrecyclers.com

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

For further information concerning this matter, please call:

Frank Miller

585
at ()

734-7474

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 2, 2018

FRANK MILLER
LAKE COUNTRY FRACWATER SPECIALISTS, LLC
5568 WOODBINE ROAD, SUITE #395
PACE, FL 32571

SUBJECT: LAKE COUNTRY FRACWATER SPECIALISTS, LLC
Ref. Number: W18000060869

We have received your document for LAKE COUNTRY FRACWATER SPECIALISTS, LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

The form submitted is for the qualification of a foreign corporation not an LLC.

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.

Nanette Causseaux
Regulatory Specialist II Supervisor

Letter Number: 818A00013688

7/19/2018

Lake Country Fracwater Specialists, LLC
5568 Woodbine Rd. Suite #395
Pace, Fl. 32571

Division of Corporations
Registration Section
PO Box 6327
Tallahassee, Fl 32314

Dear Sir/Madam:

Enclosed please find my replacement application for Registration as a foreign limited liability corporation to transact business in Florida for Lake Country Fracwater Specialists, LLC.

I had incorrectly filed the form for a Corporation on 6/21/2018.

Also find enclosed my check for the balance due for my filing fee and certificates of \$72.5 as I had paid \$87.50 with my previous, incorrect application.

Thank you,

Frank Miller



**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. Lake Country Fracwater Specialists, 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, USA
(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. 2556 Caldwell Circle
(Street Address of Principal Office)
Pace
Florida, 32571

6. 5568 Woodbine Rd.
(Mailing Address)
Pace
Florida, 32571

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

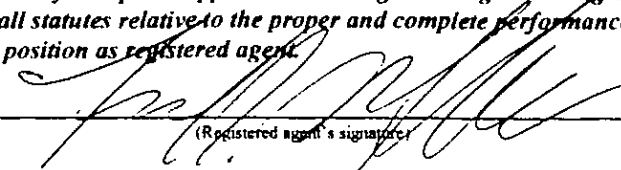
Name: Frank Miller

Office Address: 2556 Caldwell Circle

Pace, Florida 32571
(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.


(Registered agent's signature)

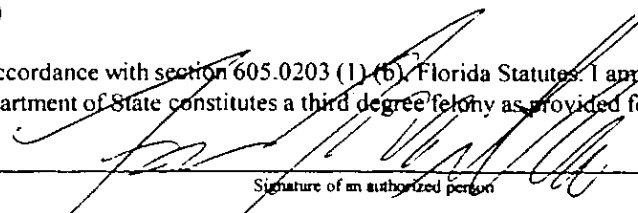
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>President</u>	<u>Frank Miller</u> <u>2556 Caldwell Circle</u> <u>Pace, Florida 32571</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 of an authorized person

Frank Miller

Typed or printed name of signee

218 AUG - 1 AM 10:56

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LAKE COUNTRY FRACWATER SPECIALISTS, 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 THIRTEENTH DAY OF JUNE, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LAKE COUNTRY FRACWATER SPECIALISTS, LLC" WAS FORMED ON THE FIFTH DAY OF MARCH, A.D. 2010.

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

FILED
SECRETARY OF STATE
2018 AUG -1 AM 10:56



4796141 8300

SR# 20185121525

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

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 202872925

Date: 06-13-18