

MR8000007470

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

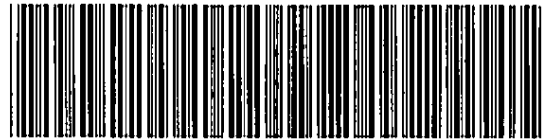
(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE FLORIDA

n BRUCE
AUG 14 2018



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 1, 2018

PHYLLIS K. BUTLER
900 PLYMOUTH SORRENTO ROAD #213
PLYMOUTH, FL 32768-0213

SUBJECT: TABLE ROCK DISTRIBUTING, LLC
Ref. Number: W18000070118

We have received your document for TABLE ROCK DISTRIBUTING, 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):

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.

Deborah Bruce
Corporate Records Supervisor

Letter Number: 018A00015870

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TALLAHASSEE FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TABLE ROCK DISTRIBUTING, 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:

PHYLLIS K. BUTLER
Name of Person

~~DBA~~ ~~INTERPRETER~~
Firm/Company

900 PLYMOUTH SORENTO ROAD #213
Address

PLYMOUTH, FL 32768-0213
City/State and Zip Code

Kathy@tablerock.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PHYLLIS KATHLEEN BUTLER at (740) 398-0104
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

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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. TABLE ROCK DISTRIBUTING, 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. STATE OF OHIO 3. 61-1577971
(Jurisdiction under the law of which foreign limited liability company is organized) (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. 19885 Detroit Rd 6. 900 Plymouth Sorrento Rd
(Street Address of Principal Office) (Mailing Address)
119 # 213
Rocky River, OH 44116 Plymouth, FL 32768-0213

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

Name: PHYLLIS Butler
None
Office Address: 824 Crepe Myrtle Circle
APOPKA, Florida 32712
(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.

Phyllis K Butler
(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>manager</u>	<u>Phyllis K Butler</u> <u>824 Crepe Myrtle Circle</u> <u>APOPKA, FL 32712</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.

Phyllis K Butler
Signature of an authorized person
PHYLLIS K Butler
Typed or printed name of signee

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

UNITED STATES OF AMERICA
STATE OF OHIO
OFFICE OF THE SECRETARY OF STATE

I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show TABLE ROCK DISTRIBUTING LLC, an Ohio For Profit Limited Liability Company, Registration Number 2042403, was organized within the State of Ohio on August 22, 2011, is currently in FULL FORCE AND EFFECT upon the records of this office.



*Witness my hand and the seal of the
Secretary of State at Columbus, Ohio
this 23rd day of July, A.D. 2018.*

Jon Husted

Ohio Secretary of State

Validation Number: 201820402100