

M18000007914

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

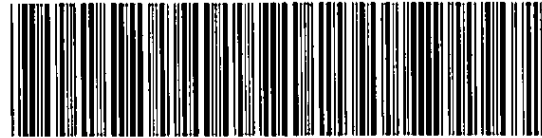
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2018 AUG 28 PM 1:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N CULLIGAN

AUG 28 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Lake Cicott Shores MHP, 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:

Conrad H Peyton
Name of Person

Lake Cicott Shores MHP, LLC
Firm/Company

192 W Clifton PL
Address

Beverly Hills, FL 34465
City/State and Zip Code

Conrad.peyton@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Conrad Peyton at (812) 454-2148
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

August 27, 2018

CONRAD H PEYTON
192 W CLIFTON PLACE
BEVERLY HILLS, FL 34465

SUBJECT: LAKE CICOTT SHORES MHP, LLC
Ref. Number: W18000074567

We have received your document for LAKE CICOTT SHORES MHP, LLC and your check(s) totaling \$130.00. However, the document has not been filed and is being retained in this office for the following:

You failed to make the correction(s) requested in our previous letter.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6052.

Neysa Culligan
Regulatory Specialist II

Letter Number: 418A00017016

*Spoke
on 8/28/18 @ 11:51
email CUS*

**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 Cicott Shores MHP, 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. Indiana USA
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 83-10552649
(FEI number, if applicable)

4. N/A
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 192 W Clifton Pl
(Street Address of Principal Office)
Beverly Hills, FL 34465

6. PO Box 2108
(Mailing Address)
INVERNESS, FL 34465

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


Name: Conrad H Peyton

Office Address: 192 W Clifton Pl

Beverly Hills, Florida 34465
(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)

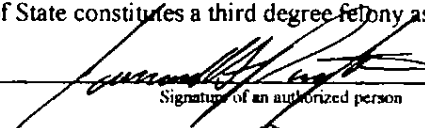
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>Conrad Owner/Manager</u>	<u>Conrad Peyton</u> <u>192 W Clifton Pl</u> <u>Beverly Hills, FL 34465</u>		
<u>Owner/Manager</u>	<u>Brittany Peyton</u> <u>192 W Clifton Pl</u> <u>Beverly Hills FL 34465</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
Conrad H Peyton
Typed or printed name of signee

FILED
2019 AUG 28 PM 1:03
CLERK OF STATE
TALLAHASSEE, FLORIDA

State of Indiana
Office of the Secretary of State

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

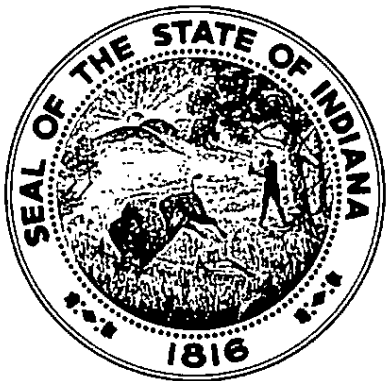
I, CONNIE LAWSON, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

LAKE CICOTT SHORES MHP, LLC

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on June 27, 2018, and was in existence or authorized to transact business in the State of Indiana on August 28, 2018.

I further certify this Domestic Limited Liability Company has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution, or expiration has been filed or taken place. All fees, taxes, interest, and penalties owed to Indiana by the domestic or foreign entity and collected by the Secretary of State have been paid.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, August 28, 2018

Connie Lawson

CONNIE LAWSON
SECRETARY OF STATE

201806271265323 / 2018712506

All certificates should be validated here: <https://bsd.sos.in.gov/ValidateCertificate>

Expires on September 27, 2018.