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SECRETARY OF STATE
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COVER LETTER

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ťО:		ition Section of Corporation	s				
SUBJI		FL, LLC					
30,031			Name of	Limited Liability C	ompany		
The en Exister	closed "Ap	oplication by Fore eck are submitted	eign Limited Liability Comp I to register the above refero	oany for Authoriza enced foreign limit	tion to Tra ed liability	nnsact Business in Florida," Certifica company to transact business in Flo	ite of oriđa.
Please	return all	correspondence c	oncerning this matter to the	following:			
		Jennifer Salinas					
			N	ame of Person			
		BTFL, LLC					
			Fi	rm/Company			
	82	3 Summer La	ike Ct				
		· · · · · · · · · · · · · · · · · · ·		Address		 -	
		Fairhope, AL 36	6532				
			City/S	tate and Zip Code			
		cperry@accounti	ngplusservices.com				
	-	<u></u>	E-mail address: (to be used	d for future annual	report not	ification)	
For fu	rther inform	nation concerning	this matter, please call:				
	Colette	Perry		850 _at (291-76 _)	07	
		Name o	f Contact Person	Area Code	Day	time Telephone Number	
	Divisior Registra P.O. Bo	NG ADDRESS: n of Corporations ation Section x 6327 ssee, FL 32314			Division Registrat Clifton B 2661 Exe	of Corporations ion Section duilding recutive Center Circle see, FL 32301	
Enclos		ck for the followi .00 Filing Fee	ing amount: S130.00 Filing Fee & Certificate of Status	□ \$155.00 Filir Certified Copy	ıg Fee &	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy	



August 16, 2018

JENNIFER SALINAS 823 SUMMER LAKE ST FAIRHOPE, AL 36523

SUBJECT: BTFL, LLC

Ref. Number: W18000074402

We have received your document for BTFL, LLC and your check(s) totaling \$125.00. 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.

I have retained your certificate.

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: 318A00016981

www.sunbiz.org

DO TO BOY OF

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPILANCE 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:

	Limited Liability Company; must include "Li			THI I C T MI I
	ame adopted for the purpose of transacting business	in Florida. The alterna	ite name must include "Limited tilat	ility Company, "L.t.C, or C.t.C.)
2. Alabama (Jurisdiction under the law of w	hich foreign limited liability company is organized)	_ 3	(FEI numb	er, if applicable)
4. 07/01/2018				
4. 0/101/2018	(Date first transacted business in Florida, if pr (See sections 605,0904 & 605,0905, F.S. to de	or to registration.)		
52 3ummer Lake Rd, F	·	6.		
(Street Address of)		0	(Mailing Addr	(55)
	6 TH. 11	D NOT		E P
7. Name and street addres	ss of Florida registered agent: (P.O.	ROX NOT acce	eptable)	ARY SSI
Name:	Colette Perry	· · ·	_	
Office Address:	362 Riola Place			
	Pensacola		, Florida 32506	92 6
	(City)		(Zip code	<u> </u>
to comply with the provis	ious of an signification of the section is	oper ana compi	lete performance of my (uuues, ana 1 am jamuuar wun
and accept the obligation	s of my position as registered agent. Registered ag	ent's sipadure)		luties, and I am familiar with
and accept the obligation	s of my position as registered again.	tent's sibadure)		Name and Address:
and accept the obligation8. The name, title or cap.	Registered again. Registered against acity and address of the person(s) when Name and Address: Jennifer Salinas	tent's sibadure)	nority to manage is/are:	
8. The name, title or cap. Title or Capacity:	Registered agent.	tent's sibadure)	nority to manage is/are:	
8. The name, title or cap. Title or Capacity:	Registered agent.	tent's sibadure)	nority to manage is/are:	
8. The name, title or cap. Title or Capacity: Pres	Registered agent. Summe and Address: Jennifer Salinas: Summer Lake St Fairhope, AL 36 5 3 3 Colette Perry 32 Riola Pl Pensacola, FL 3250	tent's sibadure)	nority to manage is/are:	
8. The name, title or cap. Title or Capacity: Pres Treas (Use attachments if neces)	Registered agent. Summer and Address: Jennifer Salinas: Summer Lake St. Fairhope, AL 36 5 3 3. Colette Perry 32 Riola Pl. Pensacola, FL. 3250 4. Registered agent. Sammer Lake St. Fairhope, AL 36 5 3 3. Colette Perry 32 Riola Pl. Pensacola, FL. 3250 4. Registered agent.	no has/have auth Title	nority to manage is/are: or Capacity: nticated by the official ha	Name and Address:

Typed or printed name of signee

John H. Merrill Secretary of State P.O. Box 5616 Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that BTFL LLC was formed in Baldwin County, Alabama on April 25, 2017. The Alabama Entity Identification number for this entity is 390-213. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



20180627000014126

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

06/27/2018

Date

X.W. Merill

John H. Merrill

Secretary of State