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SEUNGLANY OF STATE

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COVER LETTER

TO:

TO:	Registration Section Division of Corporation	ns						
SUBJE	A Little Tilted Prod	uction, LLC						
		Name of I	Limited Liability (Company				
		reign Limited Liability Comp ed to register the above refere						
Please	return all correspondence of	concerning this matter to the	following:					
	Timothy K. Joi	rdan, Esq.						
Name of Person								
	Minor & Brow	Minor & Brown, P.C.						
Firm/Company								
	650 South Cherry Street, Suite 1100							
	Address							
	Denver, CO 80	246			ואני	5.Co	2010 SEP	-17
		City/S	tate and Zip Code				P 10	Same and
	tmorgan@mb-la				, (2007 2007 2007	0 PH	
		E-mail address: (to be used	d for future annual	report not	ification)	= 0	Œ.	Parent .
For fur	ther information concerning	g this matter, please call:				E SILIE	2: 56	ي الانتخاص
	Timothy K. Jordan		303 at (376-600	06			
	Name o	of Contact Person	Area Code	Day	time Telephone Numb	рег		
	MAILING ADDRESS: Division of Corporation: Registration Section P.O. Box 6327 Tullahassee, FL 32314			Division of Registrati Clifton B 2661 Exe	CADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301			
Enclos	ed is a check for the follow S125.00 Filing Fee	ving amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	ng Fee &	☐ \$160.00 Filing For Status & Certifie			:

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. A Little Tilted Product (Name of Foreign	ion, LLC Limited Liability Company; must include "Limite	d Liability Company," "L.L.C.," or "LI.C.")	 				
(If name unavailable, enter alternate n	ame adopted for the purpose of transacting business in Flo	rida. The ulternate name must include "Limited Lia	bility Company," "L.L.C," or "Ll.C.")				
2. Colorado (Jurisdiction under the law of w	hich foreign limited liability company is organized)	3. (FEI number, if applicable)					
4	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determ	registration.)					
5. 511 Belle Isle Avenue		6. 511 Belle Isle Avenue (Mailing Add	tess)				
Belleair Beach, FL 33786		Belleair Beach, FL 33786	~3				
		-	PS = T				
7. Name and street address	ss of Florida registered agent: (P.O. Box	NOT acceptable)	SEP 10				
Name:	Kathleen R. Hester		SE - M				
Office Address:	511 Belle Isle Avenue		E FLOS SI				
	Belleair Beach	, Florida <u>33786</u>	700				
Registered agent's accep	(City)	(Zip cod	de)				
	ions of all statutes relative to the proper s of my position as registered agent. **College Registered agent's (Registered agent's agent agent's agent	lester					
8. The name, title or cap: <u>Title or Capacity:</u>	acity and address of the person(s) who has Name and Address:	as/have authority to manage is/are: Title or Capacity:	Name and Address:				
_Manager	Kathleen R. Heste 5 <u>II Belle Isle Av</u>						
	<u>Belleair Beach, F</u>	<u>L</u> 33786					
· · · · · · · · · · · · · · · · · · ·							
		_	 .				
(Use attachments if neces	esary)	-					
9. Attached is a certificate jurisdiction under the law of the translator must be s	of existence, no more than 90 days old, of which it is organized. (If the certificat ubmitted)	duly authenticated by the official ha e is in a foreign language, a translat	aving custody of records in the tion of the certificate under oath				
	ruted in accordance with section 605.020, to the Department of State constitutes a the	ird degree felony as provided for in					
		of an authorized person					
	Signature	or an authorized person					
	Kathleen R. Hester						

Typed or printed name of signee

OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

I. Wayne W. Williams, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

A Little Tilted Production, LLC

is a

Limited Liability Company

formed or registered on 08/09/2018 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20181631016.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 08/31/2018 that have been posted, and by documents delivered to this office electronically through 09/04/2018 @ 10:42:13.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 09/04/2018 @ 10:42:13 in accordance with applicable law. This certificate is assigned Confirmation Number 11097834



Secretary of State of the State of Colorado

*******************End of Certificate*****************

Natice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, http://www.vos.state.com/sbt/CertificateSearchCriticateSearchCriticate do entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, http://www.vos.state.com/click//Businesses, trademarks, trade names//and select//Frequently Asked Questions//