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(B	usiness Entity Name)
(D	ocument Number)	
Certified Copies	Certificates c	of Status
Special Instructions to Filing Officer:		
	Office Use Only	



09/25/16--01000--010 **180.00

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M. MILLIGAN SEP 2 5 2018

Déar Administration I am sanding documents on behalf of Telesford gonzalez + Derek Marshall to register their respective companies with the State of Florida as Forcign Corporations. Please advise if there is anything missing or inaccurate in these applications. Charles Crispin 312-907-0819 OCTISPIN 131 29MOIL CON P.S. 9/20/18 Derek Marshall made à last minute decision to change the name of his company to Marshall Wood Floors, LLC

9/19/18

COVER LETTER

TO: **Registration Section Division of Corporations**



For further information concerning this matter, please call:

Ales Crispin at <u>312</u> <u>907-08/9</u> 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: St25.00 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 SRAN IN FLORIDA IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LABRITYS COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: (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,") 83-1825914 (FEI number, if applicable 3. the law of which foreign limited liability company is organized) tober L 2019 nda, if prior to registration F.S. to determine penalty nalty liability) c/o Charles Cri Albany Highnay, Ste 1256 5. 6. Palm Brach, FL 33405 West

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

Name:	<u>Charles</u> Gispin	
Office Address:	1335 Old OKeachober R	el Suite 450
	West Blm Beach	Florida <u>33401</u> (Zin 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 peristered agent.

Secratary

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>: Name and Address: Title or Capacity:

Name and Address:

+22m

(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.

Cen
Signature of an authorized person
Colla Cont
Maries Crispin
Typed or printed name of Ignee



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of

Business Services. I certify that

ZORROWOOD FINE FLOORS LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON SEPTEMBER 05, 2018, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE. AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 25TH day of SEPTEMBER A.D. 2018.

Authentication #: 1826802580 verifiable until 09/25/2019 Authenticate at: http://www.cyberdriveillinois.com

Jesse White

SECRETARY OF STATE