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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
1A5160 1	W18-80	1473

Office Use Only



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SEP 2 8 2018



September 8, 2018

VICTORIA VIGNA 6990 82 AVE N PINELLAS PARK, FL 33781

SUBJECT: PUREVER CLEAN LLC Ref. Number: W18000080473

We have received your document for PUREVER CLEAN LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 818A00018619

Octavia L Simmons Regulatory Specialist III

2010 SEP 26

COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJI	ECT: <u>PURE</u>	VER (/	EAN LL C Limited Liability C	ompany		
The en Exister	closed "Application by Foreign Limitence, and check are submitted to register	d Liability Com the above refer	pany for Authorizat enced foreign limite	tion to Tra ed liability	nsact Business in Florida," Certifica company to transact business in Flo	ite of orida.
Please	return all correspondence concerning t	his matter to the	following:			
	VIC TORIA	VigNA	Name of Person			
	Bookkeeping	Service F	irm/Company	,		
	6990 82	Ave N	Address			
	PINE MAS 1					
	taxpro. Vick					
For fur	ther information concerning this matter					
	VICTORIA VIGNA Name of Contact P	erson	at (727 Area Code) <u>548</u> Day	4 - 3797 time Telephone Number	
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			STREET Division of Registrati Clifton Br 2661 Exe	ADDRESS: of Corporations on Section	
Enclos		Filing Fec & e of Status	□ \$155.00 Filin Certified Copy	g Fee &	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy	

APPLÍCATION 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:

(If name unavailable, enter alternate na	R CLEAN LL imited Liability Company; mus			imited Liability Company," "L.L.C," or "LLC.")
2. OH/O Clurisdiction under the law of whi	ch foreign limited liability company	is opposed)	3. 87-54/6	/37 (FEI number, if applicable)
(September 6000) the fact of all	en roreign mines matrice company	is organized)		trus adamer, a apparable)
4.	UPON	FILINO		
	(Date first transacted business (See sections 605.0904 & 605.	in Florida, if prior to regis	tration.)	
- 0105 (A) Y		0705, 1.0. to determine p	cany mounty)	1 1 1 - 1
5. 9100 /26) (Street Address of Pr	nocinal Office)	_	6. <u>9/00</u> /	26 th AUE N.
	FL: 33773		1000	FL 23772
24280,	PL 33//3		-AKGO	FL 33773
	<u> </u>	_		
7. Name and street address Name:	of Florida registered age		OT acceptable)	· ·
· ·	•			
Office Address:	9100 126	* AUE N.		'
				- -
	LARGO E	· -	, Florida <u></u>	<u>3773</u>
Registered agent's accept	ance	(City)		(Zip code)
o comply with the provision and accept the obligations	ons of all statutes relative of my position as segiste	e to the proper of cred agent.	d complete performance	e to act in this capacity. I further agr of my duties, and I am familiar with
and accept the obligations	ons of all statutes relative of my position as segiste	e to the proper of cred agent. All (Registered agent's signa	d complete performance	of my duties, and I am familiar with
to comply with the provision and accept the obligations 8. The name, title or capa Title or Capacity:	ons of all statutes relative of my position as segiste	e to the proper of cred agept. (Registered agent's signa crson(s) who has/h	d complete performance	of my duties, and I am familiar with
8. The name, title or caparities or Capacity:	ons of all statutes relative of my position as segisted as segisted as segisted as segisted and address of the period and Address of the period and Address and Address and Address and Address of the period and Address and	e to the proper of ered agent. (Registered agent's signal erson(s) who has/h dress:	ave authority to manage	of my duties, and I am familiar with is/are: Name and Address:
and accept the obligations 8. The name, title or capa	city and address of the pe	(Registered agent's signal erson(s) who has/h dress:	d complete performance	of my duties, and I am familiar with is/are: Name and Address:
8. The name, title or caparities or Capacity:	city and address of the pe	e to the proper and pred agent. (Registered agent's signal erson(s) who has/hadress:	ave authority to manage	of my duties, and I am familiar with is/are: Name and Address:
8. The name, title or caparities or Capacity:	city and address of the pe	(Registered agent's signal erson(s) who has/h dress:	ave authority to manage	is/are: Name and Address: Adam M. Demilta 9100 126 Ave N Largo FL 33773
8. The name, title or caparities or Capacity:	city and address of the period of Marie and Address of the period of the	(Registered agent's signal reson(s) who has/hadress:	ave authority to manage	of my duties, and I am familiar with is/are: Name and Address:
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8. The name, title or caparititle or Capacity: MGR (Use attachments if necess 9. Attached is a certificate jurisdiction under the law of	city and address of the per Name and Address of the per Na	to the proper and the proper and agent. (Registered agent's signal arson(s) who has/hadress: Tolden Vem Rd. TOH 4308/ KINS TA AUE N. L. 33773 In 90 days old, dul	ave authority to manage Title or Capacity: MGR	is/are: Name and Address: Adam M. Demilta 9/00 /26 Ave N Largo FL 33773 JEFFREY ARROWOO 9/00 /26 Ave N
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8. The name, title or caparatitle or Capacity: MGR (Use attachments if necess purisdiction under the law cof the translator must be sure.) 10. This document is executions.	city and address of the period of my position as segisted and address of the period of	red agent. (Registered agent's signal reson(s) who has/hadress: Aden Rd. Aden Rd. Aden Aden Aden Aden	ave authority to manage Title or Capacity: MGR y authenticated by the offerin a foreign language, a (b), Florida Statutes. I a degree felony as provided	is/are: Name and Address: Adam M. Demilta. 9/80 / 26 Rue N. Largo FL 33773 JEFFREY ARROWOO 9/80 / 26 Rue N. LARGO FL 33773 ficial having custody of records in the translation of the certificate under oather any false information

Typed or printed name of signee

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 PUREVER CLEAN LLC, an Ohio For Profit Limited Liability Company, Registration Number 4173107, was organized within the State of Ohio on April 28, 2018, 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 28th day of August, A.D. 2018.

Ohio Secretary of State

Validation Number: 201824002004