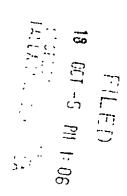
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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
name W18.80443
TIME WIS COILD

Office Use Only



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O SIMMONS OCT 15 2018



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 24, 2018

JEFF DITTY 1505 ROSADA WAY FT MYERS, FL 33901

SUBJECT: LMS HOLDINGS, LLC Ref. Number: W18000080443

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

The alternate name that you have chosen is not available. Please select a new

The document number of the name conflict is 650418.

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

Octavia L Simmons Regulatory Specialist III

Letter Number: 918A00019925



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 8, 2018

JEFF DITTY 1505 ROSADA WAY FT MYERS, FL 33901

HOLDINGS SUBJECT: LMS HJOLDINGS, LLC Ref. Number: W18000080443

HOLDING (

We have received your document for LMS HJOLDINGS, 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):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

The document number of the name conflict is L07000007567.

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

Octavia L Simmons Regulatory Specialist III

Letter Number: 118A00018613

COVER LETTER

TO:

Registration Section

Div	ision of Corporation	ns							
SHR IFCT:	LMS Holdings, LL	С							
		Name of Limited Liability Company							
					ansact Business in Florida," Certificate o y company to transact business in Florida				
Please return	all correspondence	concerning this matter to the	following:						
	Jeff Ditty								
		N	ame of Person						
	LMS Holdings	, LLC							
	Firm/Company								
1505 Rosada Way									
Address									
	Fort Myers, FL 33901								
		City/S	tate and Zip Code						
	jeffditty2006@c	omcast.net							
		E-mail address: (to be use	d for future annual	report no	ification)				
For further in	nformation concernin	g this matter, please call:							
Jeff Ditty		859 at (421-48						
	Name o	of Contact Person	Area Code	Day	time Telephone Number				
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, F1, 32314		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301							
	check for the follow 125.00 Filing Fee	ing amount: S130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	ig Fee &	☐ \$160,00 Filing Fee, Certificate of Status & Certified Copy				

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

IN COMPILANCE WITH SECTION 605,0002, FLORIDA STATUTEN, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN TEMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

LMS Holdings, LLC	Emited Liability Company, must inclu	J. W J. L		
	Mini Storage HO		f, LLC, or LLC.	
	name adopted for the purpose of transacting bu		most include "Limited Lial	nility Company," "L.L. C," or "LLC.")
Kentucky		3 82-190	9838	
(Jurisdiction under the law of w	hich foreign limited liability company is organ	•/-		er, if applicable)
August 1, 2018				
	(Date first transacted business in Florid (See sections 605 0904 & 605,0905, F.)	a, if prior to registration.) S. to determine penalty liability (
1505 Rosada Way		6. 1505 Ro	osada Way	
(Street Address of Ft. Myers, FL 33901	Principal Office)		(Mailing Addr rs, FL 33901	6
14. Wiyers, 14. 5.701		rt. wiye.	18, FL 33901	
				<u> </u>
Name and street address	ss of Florida registered agent: (F	PA Boy NOT acceptable	a)	5 71
ivanic and <u>street addre.</u>		.o. box (NOT acceptabl	c)	三 型 コ
Name:	Jeff Ditty			
Office Address:	1505 Rosada Way			1: 06
	Ft. Myers		Florida 33901	9* 97
	(City)	• •	(Zip code	
	(B			
	TACKING	red akout, Mangane)		
The name, title or capa <u>Title or Capacity:</u>	acity and address of the person(s <u>Name and Address:</u>		_	Name and Address
<u> </u>		<u>inte or Ca</u>	ipacity:	Name and Address:
Mgr	Jeff Ditty 1505 Rosada Way			
	Ft Myers 33901	_		
				
se attachments if neces	sary)			
Attached is a certificate isdiction under the law the translator must be so	of existence, no more than 90 do of which it is organized. (If the cubmitted)	ays old, duly authenticate certificate is in a foreign l	d by the official ha anguage, a translati	ving custody of records in t on of the certificate under (
and the second second			S t	
. This document is exect bmitted in a document to	uted in accordance with section (the Department of State constit	utes a third degree felony	as provided for in s	e that any false information .817.155, F.S.
bmitted in a document to	uted in accordance with section () the Department of State constit	signiff of authorized person	as provided for in s	e that any false information .817.155, F.S.
bmitted in a document to	uted in accordance with section () the Department of State constit Leff Ditty	utes a third degree felony	as provided for in s	e that any false information 1817.155, F.S.

Typed or printed name of signee

Commonwealth of Kentucky Alison Lundergan Grimes, Secretary of State

Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

Certificate of Existence

Authentication number: 206144

Visit https://app.sos.ky.gov/ftshow/certvalidate.aspx to authenticate this certificate.

I, Alison Lundergan Grimes, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the regords in the Office of the Secretary of State,

LMS Holdings LLC

is a limited liability company duly organized and existing under KRS Chapter 14A and KRS Chapter 275, whose date of organization is June 1, 2017 and whose period of duration is perpetual?

I further certify that all fees and penalties owed to the Secretary of State have been paid; that articles of dissolution have not been filed; and that the most recent annual report required by KRS 14A.6-010 has been delivered to the Secretary of State.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal at Frankfort, Kentucky, this 24th day of August, 2018, in the 227th year of the Commonwealth.

CONTRACTOR STORE TARTOR STORE TO STORE TARTOR STORE TARTO

Alison Lundergan Grimes

Secretary of State

Commonwealth of Kentucky

206144/0987095