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| (Re | equestor's Name) | |
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| (Cit | ty/State/Zip/Phon | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nar | me) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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WK & Salah



September 24, 2018

SCOTT STACKHOUSE 1705 VALLEY HIGH DRIVE CEDAR FALLS, IA 50613

SUBJECT: SE CLEAN LAUDRY OBT, L.L.C.

Ref. Number: W18000085125

We have received your document for SE CLEAN LAUDRY OBT, L.L.C. and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

If you have any questions concerning the filing of your document, please call (850) 245-6939.

Tammi Cline Regulatory Specialist III

Letter Number: 218A00019893

COVER LETTER

| TO: | Registration Section Division of Corporation | ns | | | | |
|-----------|--|--|------------------------------------|--|--|-------------------|
| SUBJE | SE CLEAN LAUN | DRY OBT, L.L.C. | | | | |
| | | Name of | Limited Liability | Company | · · · · · · · · · · · · · · · · · · · | _ |
| | | reign Limited Liability Corr ed to register the above refe | | | | |
| Please re | eturn all correspondence | concerning this matter to the | e following: | | | |
| | SCOTT STAC | KHOUSE | | | | |
| | | 7 | lame of Person | | | _ |
| | STACKHOUS | E ENTERPRISES, INC. | | | | |
| | | F | irm/Company | | | |
| | 1705 VALLEY | ' HIGH DRIVE | | | | gn _e ğ |
| | | | Address | | | |
| | CEDAR FALL | S, IOWA 50613 | | | ¥* | SE: 2, |
| | | City/S | State and Zip Code | ; | | |
| | SCOTT@STAC | KHOUSELIVE.COM | | | | <u>.</u> မ |
| | | E-mail address: (to be use | d for future annua | report no | tification) | . 53 |
| For furth | er information concernin | g this matter, please call: | | | | |
| | SCOTT STACKHOUS | 3 | 319 at (| 230-84 | 00 | |
| | Name o | of Contact Person | Area Code | Day | ytime Telephone Number | _ |
| | MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 | | | Division Registrat Clifton B 2661 Exc | of Corporations ion Section Building ecutive Center Circle see, FL 32301 | |
| | is a check for the follow 日 \$125.00 Filing Fee | ing amount: \$\square\$ \$130.00 Filing Fee & Certificate of Status | ☐ \$155.00 Filin Certified Copy | ng Fee & | ☐ \$160.00 Filing Fee, of Status & Certified C | |

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. SE CLEAN LAUNDE | RY OBT, L.L.C. Limited Liability Company, must include "Limite | Territor A. Burney W. A. | | |
|---|--|--|---|------------------------------------|
| (Name of Foreign | n Cimited Clabitity Company; must include "Limite | d Liability Company,""L.L.G.," or "LLC." |) | |
| (If same unavailable, enter alternate | man adopted for the purpose of tremseting business in Fig. | rids. The alternate name must isolode "Limited Li- | ability Company," "L.L.C," or | ~13.C.^) |
| 2 IOWA | | 3. 38-4091387 | | |
| (Twisdiction under the law of t | which foreign limited liability company is organized) | | ber, if applicable) | |
| 4. OCTOBER 1, 2018 | | | | |
| | (Date first transacted business in Florida, if prior to (Soo sections 605,0904 & 605,0905, F.S. to datern | registration.) ine penaky liability) | | Baril . |
| 5. 322 and 324 S. Orang | c Blossom Trail | 6. 1705 Valley High Drive | | र् <mark>जि</mark> |
| (Street Address of | • | (Mailing Add | (rest) | |
| Orlando, Florida 3280 | 3 | Cedar Falls, Iowa 50613 | | -5 -5 |
| | | · · · · · · · · · · · · · · · · · · · | - a | |
| 7. Name and street addre | ss of Florida registered agent: (P.O. Box | NOT acceptable) | com. | ~; ** |
| Name: | CT Corporation System | | _ ~ | دب |
| | 1200 Court Ding toland Board | + | 43 - | CT CT |
| Office Address: | 1200 South Pine Island Road | | | |
| | Plantation | , Florida 33324 | | |
| Registered agent's accep | (Ciry) | (Zip cod | <) | |
| to comply with the provision | ions of all statutes relative to the proper | and complete performance of my | • • | |
| to comply with the provisi and accept the obligation | s of my position as registered agent. CT Corporation System: Suca. | Mull | duties, and I am fam Brian Mueili Assistant Secn | er |
| to comply with the provisi and accept the obligation | s of my position as registered agent. | Mull | Brian Muell | er |
| 8. The name, title or caps | CT Corporation System: (Registered agent. (Registered agent's a secity and address of the person(s) who has | ignature) Shave authority to manage is/are: | Brian Muell Assistant Secn | er etary |
| 8. The name, title or cape Title or Capacity: | CT Corporation System: Sun (Regiment agent) (Regiment agent's such address of the person(s) who has Name and Address; | Mastle Tastle | Brian Muell | er etary |
| 8. The name, title or caps | CT Corporation System: (Reginered agent. (Reginered agent's sacity and address of the person(s) who has Name and Address; Scott Stackhouse | ignature) Shave authority to manage is/are: | Brian Muell Assistant Secn | er etary |
| 8. The name, title or caps Title or Capacity: | CT Corporation System: Sun (Regiment agent) (Regiment agent's such address of the person(s) who has Name and Address; | ignature) Shave authority to manage is/are: | Brian Muell Assistant Secn | er etary |
| 8. The name, title or cape Title or Capacity: | CT Corporation System: (Regiment agent). (Regiment agent's statistically and address of the person(s) who has Name and Address; Scott Stackhouse 1705 Valley High Drive | ignature) Shave authority to manage is/are: | Brian Muell Assistant Secn | er etary |
| 8. The name, title or caps Title or Capacity: | CT Corporation System: (Regiment agent). (Regiment agent's statistically and address of the person(s) who has Name and Address; Scott Stackhouse 1705 Valley High Drive | ignature) Shave authority to manage is/are: | Brian Muell Assistant Secn | er etary |
| 8. The name, title or caps Title or Capacity: | CT Corporation System: (Regiment agent). (Regiment agent's statistically and address of the person(s) who has Name and Address; Scott Stackhouse 1705 Valley High Drive | ignature) Shave authority to manage is/are: | Brian Muell Assistant Secn | er etary |
| 8. The name, title or caps Title or Capacity: | CT Corporation System: (Regiment agent's statety and address of the person(s) who has Name and Address; Scott Stackhouse 1705 Valley High Drive Cedar, Falls, 1A 50613 | ignature) Shave authority to manage is/are: | Brian Muell Assistant Secn | er etary |
| 8. The name, title or capse Title or Capacity: CEO (Use attachments if necess 9. Attached is a certificate | CT Corporation System: (Regiment agent's statety and address of the person(s) who has been statety and address of the person(s) who has been statety and address; Scott Statethouse 1705 Valley High Drive Codar Falls, 1A 50613 Sarry) of existence, no more than 90 days old, doff which it is organized. (If the certificate | Shave authority to manage is/are: Title or Capacity: uly authenticated by the official have | Brian Muelli Assistant Secon Name and Address ving custody of reconstructions | er etary |
| 8. The name, title or caps Title or Capacity: CEO (Use attachments if necess 9. Attached is a certificate jurisdiction under the law of the translator must be su 10. This document is execu | CT Corporation System: (Regiment agent's stackhouse 1705 Valley High Drive Cedar Falls, IA 50613 sary) of existence, no more than 90 days old, dof which it is organized. (If the certificate abmitted) ated in accordance with section 605,0203 | where authority to manage is/are: Title or Capacity: uly authenticated by the official hais in a foreign language, a translation (1) (b), Florida Statutes, I am aware | Brian Muelle Assistant Second Name and Address ving custody of record on of the certificate uses that any false informs | er etary ss: ds in the nder oath |
| 8. The name, title or caps Title or Capacity: CEO (Use attachments if necess 9. Attached is a certificate jurisdiction under the law of the translator must be su 10. This document is execu | CT Corporation System: (Regiment agent's stackhouse 1705 Valley High Drive Cedar Falls, IA 50613 sary) of existence, no more than 90 days old, dof which it is organized. (If the certificate obmitted) | where authority to manage is/are: Title or Capacity: uly authenticated by the official hais in a foreign language, a translation (1) (b), Florida Statutes, I am aware | Brian Muelle Assistant Second Name and Address ving custody of record on of the certificate uses that any false informs | er etary ss: ds in the nder oath |
| 8. The name, title or caps Title or Capacity: CEO (Use attachments if necess 9. Attached is a certificate jurisdiction under the law of the translator must be su 10. This document is exect | CT Corporation System: (Regiment agent's statety and address of the person(s) who has been and Address; Scott Stackhouse 1705 Valley High Drive Cedar Falls, IA 50613 sary) of existence, no more than 90 days old, dof which it is organized. (If the certificate obmitted) ated in accordance with section 605,0203 the Department of State Constitutes a shire. | where authority to manage is/are: Title or Capacity: uly authenticated by the official hais in a foreign language, a translation (1) (b), Florida Statutes, I am aware | Brian Muelle Assistant Second Name and Address ving custody of record on of the certificate uses that any false informs | er etary ss: ds in the nder oath |
| 8. The name, title or caps Title or Capacity: CEO (Use attachments if necess 9. Attached is a certificate jurisdiction under the law of the translator must be su 10. This document is exect | CT Corporation System: (Regiment agent's statety and address of the person(s) who has been and Address; Scott Stackhouse 1705 Valley High Drive Cedar Falls, IA 50613 sary) of existence, no more than 90 days old, dof which it is organized. (If the certificate obmitted) ated in accordance with section 605,0203 the Department of State Constitutes a shire. | where authority to manage is/are: Title or Capacity: uly authenticated by the official hais in a foreign language, a translation of the company of the com | Brian Muelle Assistant Second Name and Address ving custody of record on of the certificate uses that any false informs | er etary ss: ds in the nder oath |

IOWA SECRETARY OF STATE PAUL D. PATE



CERTIFICATE OF EXISTENCE

Certificate Validation

The following certificate was issued by the Iowa Secretary of State Certificate ID: CS156438 Validation Date: 9/11/2018

Date: 9/11/2018

Name: SE CLEAN LAUNDRY OBT, L.L.C. (489DLC - 582488)

Date of Incorporation: 9/11/2018

Duration: PERPETUAL

- I, Paul D. Pate, Secretary of State of the State of Iowa, custodian of the records of incorporations, certify the following for the limited liability company named on this certificate:
 - a. The entity is in existence and duly incorporated under the laws of Iowa.
 - b. All fees, taxes and penalties required under the Revised Uniform Limited Liability Company Act and other laws due the Secretary of State have been paid.
 - c. The most recent biennial report required has been filed with the Secretary of State.
 - d. The Secretary of State has not administratively dissolved the limited liability company.
 - e. The Secretary of State has not filed either a statement of dissolution or statement of termination.

Paul D. Pate, Iowa Secretary of State