

M18/000009691

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

W18-66548

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W18-59865

8/9

Office Use Only



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05/25/18--01031--014 **100.00

07/12/18-01018--009 **25.00

2018 OCT 15 AM 7:56
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

WLS
1020-18



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 22, 2018

TOM S PLATTEN
201 GREEN WAY ROAD
SALINA, KS 67401 US

SUBJECT: SMOKY RIVER RENTALS LLC
Ref. Number: W18000066548

We have received your document for SMOKY RIVER RENTALS 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):

You failed to make the correction(s) requested in our previous letter.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Janeice L Smith
Regulatory Specialist II
Registration Section

Letter Number: 718A00019590

2018 OCT 15 AM 10:00

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Smoky River Rentals LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Tom S Platten
Name of Person

Smoky River Rentals
Firm/Company

201 Greenway Road
Address

Salina, KS 67401
City/State and Zip Code

tomp80cox.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tom Platten at (785) 342 9048
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:

☐ \$125.00 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
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. Smoky River Rentals LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(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.")

2. Kanvsa
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 3943222
(FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 201 Greenway Greenway Rd
(Street Address of Principal Office)

6. 201 Greenway Rd, Salina, KS 67401
(Mailing Address)

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

Name:

Tom Platten

Office Address:

2205 S Surf Rd 41B

Hollywood

(City)

Florida

33019
(Zip code)

2/18/07 11:56 AM
SECRETARY OF STATE
TALLAHASSEE, FL

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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 registered agent.

Tom Platten
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Title or Capacity:

Name and Address:

Title or Capacity:

Name and Address:

Manager

Jaime Caballero
130 Simpson St
Key West, FL 33040

Owner

Tom Platten
201 Greenway Rd
Salina, KS 67401

owner

(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.

Tom Platten
Signature of an authorized person

Tom S Platten
Typed or printed name of signer

STATE OF KANSAS
OFFICE OF
SECRETARY OF STATE
KRIS W. KOBACH

I, SECRETARY OF STATE, do hereby certify that the following information is true and correct according to the records of this office.

Business Entity ID Number: 3943222

Entity Name: KIMBERLY DAVIS KIMBLE & CO.

Entity Type: DOM: LTD LIABILITY COMPANY

State of Organization: KS

Resident Agent: TOM PLATTEN

Registered Office: 201 GREENWAY, SALINA, KS 67401

was filed in this office on May 31, 2006, and is in good standing, having fully complied with all requirements of this office.

No information is available from this office regarding the financial condition, business activity or practices of this entity.



In testimony whereof I execute this certificate and affix the seal of the Secretary of State of the state of Kansas on this day of October 05, 2018

Kris W. Kobach

KRIS W. KOBACH
SECRETARY OF STATE

Certificate ID: 1082290 - To verify the validity of this certificate please visit <https://www.kansas.gov/bess/flow/validate> and enter the certificate ID number