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10/22/2018

3239628300 From Meghan Smith

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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SECOND REQUEST. Original submission 10/22/2018

### Foreign Limited Liability Company Anderson Assembly, LLC

| Certificate of Status | U        |
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#### COVER LETTER

| Anderson Assembly, LLC SUBJECT:   |   |  |  |
|---|---|--|--|
|   | Limited Liability (                       | Company  |  |
| The enclosed "Application by Foreign Limited Liability Comp<br>Existence, and check are submitted to register the above refere                                  | eany for Authoriza<br>enced foreign limit | tion to Tra<br>ed liability                              | unsact Business in Florida," Certifica<br>v company to transact business in Flo  |
| Please return all correspondence concerning this matter to the  | following:                                |  |  |
| Cheyenne Moseley  |   |  |  |
| N   | ame of Person                             |  |  |
| Legalzoom.com, Inc.   |   |  |  |
| Fi  | rm/Company                                |  |  |
| 101 N Brand Blvd 11th Fl  |   |  |  |
|   | Address                                   |  | · · · · · · · · · · · · · · · · · · ·  |
| Glendale, CA 91203  |   |  |  |
| City/S  | tate and Zip Code                         |  | <del></del>  |
| lynn_jeske@yahoo.com<br>E-mail address: (to be used   |   |  | TOTAL STATE OF THE |
| For further information concerning this matter, please call:  | 1 for forthe annitian                     | Teproce tarn   | meationy   |
|   | 800                                       | 77 L.NS  | 88 ext9724   |
| Cheyenne Moseley  Name of Contact Person  | _ at (<br>Area Code                       | _)   | time Telephone Number  |
| MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314  | ,   | STREET<br>Division<br>Registrat<br>Clifton B<br>2661 Exe | ADDRESS: of Corporations ion Section   |
| Enclosed is a check for the following amount:  \$\Boxed{\Boxes} \$125.00 \text{ Filing Fee} \Boxed{\Boxes} \$\$\$\$\$\$\$\$\$\$\$\$\$\$\$ Certificate of Status | \$155.00 Filir<br>Certified Copy          |  | ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy  |

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

| 1   | LC   |   |   |
|---|--|---|---|
| (Name of Foreign  | Limited Liability Company, must include "Lunito  | Liability Company," "L.L.C.," or "LLC.")  |   |
|   |  |   |   |
|   | ame adopted for the purpose of transacting business in Flo   | rids. The alternate same must include "Limited Lin  | sality Company," "L.L.C," or "LLC,")  |
| 2. Montana  | hich foreign limited liability company is organized)   | 3.  | or, if applicable)  |
| ()MBCCOCK GACC CIT 24 OF -  | the focus in a constant of the |   |   |
| 4   |  | remembers )   | _ <del>_</del>  |
|   | (Date first translated business in Florida, if prior to (See sections 605 0904 & 605,0905, F.S. to determine   | ne penalty liability)   |   |
| 5. (Street Address of   |  | 6. (Mailing Add   | Piloto and A  |
| (Street Address of 1  |  | 100LS MAIN STREET ST  |   |
| Kalispell, MT 59901   |  | Kalispell, MT 59901   | <del></del>   |
| Kanspen, Wil 19701  |  |   |   |
| 7 None and assess adden   | ss of Florida registered agent: (P.O. Box  | NOT accentable)   |   |
| /. Name and street addres   |  | 1401 acceptaticy  | 22 <b>5 7</b>   |
| Name:   | Lynn Jeske   | <del></del>   | 1 ( ) |
| Office Address:   | 110 Barcelona Dr   |   |   |
| C////00 / 100/  | Royal Palm Beach   | . Florida 33-111 (7ip cod   | is - C  |
|   | (City)   | , Florida (7ip cod  | 7 25<br>7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7   |
| and accept the obligation   | s of my position us registered agent.  | Lynn Jeske  |   |
|   |  |   |   |
|   | (Roffice of sport's  | signature)  | <del></del>   |
| 8. The name, title or cap   | v  |   | <del></del>   |
| 8. The name, title or cap <u>Title or Cupacity:</u>   | (Reflected upon's acity and address of the person(s) who have and Address:   |   | Name and Address:   |
|   | acity and address of the person(s) who ha  | s/have authority to manage is/are:  | Jennifer Anderson   |
| Title or Capacity:  | acity and address of the person(s) who ha  Name and Address:  Andrew Anderson  110 Barcelona Dr  | s/have authority to manage is/are: Title or Capacity:   | Jennifer Anderson   |
| Title or Capacity:  | acity and address of the person(s) who he  Name and Address:  Andrew Anderson  | s/have authority to manage is/are: Title or Capacity:   | Jennifer Anderson   |
| Title or Capacity:  | acity and address of the person(s) who ha  Name and Address:  Andrew Anderson  110 Barcelona Dr  | s/have authority to manage is/are: Title or Capacity:   | Jennifer Anderson   |
| Title or Capacity:  | acity and address of the person(s) who ha  Name and Address:  Andrew Anderson  110 Barcelona Dr  | s/have authority to manage is/are: Title or Capacity:   | Jennifer Anderson   |
| Title or Capacity: Member   | Andrew Anderson  110 Barcelona Dr  Royal Palm Beach, FL 33411  | s/have authority to manage is/are: Title or Capacity:   | Jennifer Anderson   |
| Title or Capacity:  | Andrew Anderson  110 Barcelona Dr  Royal Palm Beach, FL 33411  | s/have authority to manage is/are: Title or Capacity:   | Jennifer Anderson   |
| Title or Capacity:  Member  (Use attachments if neces   | Andrew Anderson  110 Barcelona Dr  Royal Palm Beach, FL 33411  ssary)  of existence, no more than 90 days old, of which it is organized. (If the certificat  | As/have authority to manage is/are:  Title or Capacity:  Member  duly authenticated by the official ha                          | Jennifer Anderson  110 Barcelona Dr Royal Palm Bench, FL 33411  |
| Title or Capacity:  Member  (Use attachments if necessity)  Attached is a certificate jurisdiction under the law of the translator must be s                                    | Andrew Anderson  110 Barcelona Dr Royal Palm Beach, FL 33411  sary)  e of existence, no more than 90 days old, of which it is organized. (If the certificat ubmitted)  | Member  duly authenticated by the official has e is in a foreign language, a translate  | Jennifer Anderson  110 Barcelona Dr  Royal Palm Bench, FL 33411  aving custody of records in the tion of the certificate under outh   |
| Title or Capacity:  Member  (Use attachments if necessity)  9. Attached is a certificate jurisdiction under the law of the translator must be s  10. This document is executed. | Andrew Anderson  110 Barcelona Dr Royal Palm Beach, FL 33411.  ssary)  e of existence, no more than 90 days old, of which it is organized. (If the certificat ubmitted)  | Member  duly authenticated by the official hase is in a foreign language, a translate (1) (b), Florida Statutes, I am away      | Jennifer Anderson  110 Barcelona Dr  Royal Palm Bench, FL 33411  aving custody of records in the tion of the certificate under outh   |
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| Title or Capacity:  Member  (Use attachments if necessity attached is a certificate jurisdiction under the law of the translator must be s                                      | Andrew Anderson  110 Barcelona Dr  Royal Palm Beach, FL 33411  asary)  asary)  asary)  asary)  asary  be of existence, no more than 90 days old, of which it is organized. (If the certificat ubmitted)  asteroid in accordance with section 605.0202  be the Department of State constitutes a the Sugnature  | duly authenticated by the official has is in a foreign language, a translated of the following degree felony as provided for in | Jennifer Anderson  110 Barcelona Dr  Royal Palm Bench, FL 33411  aving custody of records in the tion of the certificate under outh   |

Eyped or printed name of signoc



## CERTIFICATE OF EXISTENCE

I, COREY STAPLETON, Secretary of State for the State of Montana, do hereby certify that:

### Anderson Assembly, LLC

duly filed its Articles of Organization in this office on June 29, 2018, and on that date was authorized to transact business in this state for a term of Perpetual duration.

Payment is reflected in the records of the Secretary of State for all fees owed to the Secretary of State.

No articles of dissolution have been placed on record in this office by said limited liability company and the records indicate the limited liability company is in good standing under the laws of the State of Montana.

The Secretary of State cannot certify that tax and penalties owed to this state on record with the Department of Revenue are current. Please contact the Department of Revenue at (406) 444-6900 to obtain information on tax status.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of Montana, at Helena, the Capital, this 22nd day of October, 2018.

COREY STAPLETON

Montana Secretary of State

Certificate Number: 102220180276