# M18000010H70

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	<del></del>
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	<del></del>
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



200320481992

11/05/18--01022--027 \*\*125.00

18 NOV -5 PH 1: 06
SLUMB AND OF PH 1: 06
FALL AHASSEE FIREBOOM

NOV 26 2018 T SCHROEDER

### COVER LETTER

enn itzet	Head2Toe Recyleing, LLC			
SUBJECT:	Name of	Chimited Liability (	Company	·
	ation by Foreign Limited Liability Com are submitted to register the above refe			
lease return all corre	spondence concerning this matter to the	e following:		
	Jessio	ca M. W. Heston		
		Name of Person		
	В	Seermann LLP		
	ı	irm/Company		
	161 North C	lark Street, Suite 30	00	
		Address		
	Chica	ago, Illinois 60601		
,. <del></del>	City/	State and Zip Code		
	•	n@beermannlaw.co		
	E-mail address: (to be use	ed for future annual	report no	tification)
For further informatio	n concerning this matter, please call:			
Jessica M. V	7. Heston	312 at (	621-97	700
	Name of Contact Person	Area Code	Day	vtime Telephone Number
MAILING / Division of C Registration P.O. Box 632 Tallahassee,	Corporations Section 27		Division Registrat Clifton B 2661 Exc	F ADDRESS: of Corporations tion Section Building ecutive Center Circle sec, FL 32301
inclosed is a check fo ■ \$125.00 F	r the following amount: fling Fee \$\Bigsis \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	g Fee &	☐ \$160.00 Filing Fee, Certificat of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUTEN, THE FOLLOWING INSUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

111 =	ianic unavailable, enter alternate i	name adopted for the purpose of transacting business in	Florida The alterna	te name must include "I muted I sals	dits Commany, " "]. 1.11" or "1.1 C")	1
	Wyoming			-2068992	,,	,
۷٠.	, .	hich foreign limited liability company is organized)	3. <u>00</u>		er, if applicable)	
4.		(Date first transacted business in Florida, if prior (See sections 605 0904 & 605 0905, F.S. to deti	fo registration (		<del></del>	
_	1080 Woodcock Road			80 Woodcock Road #151		
5.	(Street Address of		6	(Mailing Addre		
	Orlando, Florida 3280	3	Orl	lando, Florida 32803		
					%. <b>3</b>	
7.	Name and street address	ss of Florida registered agent: (P.O. B	ox <u>NOT</u> aece	ptable)		<b>-</b> -\
	Name:	Wayne Elsey				[ [
	Name:			<del></del>	(3) di (*)	
	Office Address:	1080 Woodcock Road #151		·	, — — — — — — — — — — — — — — — — — — —	Ti
		Orlando		Elected 32803		ا <del>ب</del> از
		(City)		Florida 32803 (Zip code		
	d accept the obligation	s of my position as registered agent.	ver and compl	ete performance of my a	uties, and 1 am familiar	with
			n's signature) has/have auth		Name and Address:	with
	The name, title or cap	(Registered agent.  (Registered agent.)  acity and address of the person(s) who  Name and Address:	n's signature) has/have auth	ority to manage is/are:	<u> </u>	with
	The name, title or cap Title or Capacity:	s of my position as registered agent.  (Registered general acity and address of the person(s) who	n's signature) has/have auth	ority to manage is/are:	<u> </u>	with
	The name, title or cap Title or Capacity:	Registered agent.  (Registered agent.  (Regist	n's signature) has/have auth	ority to manage is/are:	<u> </u>	with
	The name, title or cap Title or Capacity:	Registered agent.  (Registered agent.  (Regist	n's signature) has/have auth	ority to manage is/are:	<u> </u>	with
	The name, title or cap Title or Capacity:	Registered agent.  (Registered agent.  (Regist	n's signature) has/have auth	ority to manage is/are:	<u> </u>	with
	The name, title or cap Title or Capacity:	Registered agent.  (Registered agent.  (Regist	n's signature) has/have auth	ority to manage is/are:	<u> </u>	with
8.	The name, title or cap Title or Capacity:	acity and address of the person(s)—who Name and Address:  Wayne Elsey 1880 Woodcock Rd. #151 Orlando, El. 32803.	n's signature) has/have auth	ority to manage is/are:	<u> </u>	with
8. (1. 9	The name, title or cap  Title or Capacity:  MGR  ise attachments if neces  Attached is a certificate	Registered agent.  (Registered agent.  (Page 1980 agent.  (Base Woodcock Rd. #151  (Orlando, EL 32803)  (Sarry)	has/have auth Title	ority to manage is/are: or Capacity:	Name and Address:	the
(t 9. jur of 10	The name, title or cap  Title or Capacity:  MGR  See attachments if neces  Attached is a certificate isdiction under the law the translator must be s.  This document is exec	Registered agent.  (Registered agent.  (Page 1980 agent.  (Base Woodcock Rd. #151  (Orlando, EL 32803)  (Sarry)	d, duly authen cate is in a fore	ticated by the official haveign language, a translationida Statutes. I am aware	Name and Address:  ving custody of records in on of the certificate under	the oath
(t., 9,) jurnof	The name, title or cap  Title or Capacity:  MGR  See attachments if neces  Attached is a certificate isdiction under the law the translator must be s.  This document is exec	Registered agent.  (Registered agent.  (Page 1880 who  Name and Address:  Wayne Elsey  [1880 Woodcock Rd. #151  Orlando, FL 32803.  (Sarry)  (of existence, no more than 90 days of obtained it is organized. (If the certific ubmitted)  (auted in accordance with section 605.0)	d, duly authen cate is in a fore	ticated by the official haveign language, a translationida Statutes. I am aware	Name and Address:  ving custody of records in on of the certificate under	the oath
(t 9. jur of 10	The name, title or cap  Title or Capacity:  MGR  See attachments if neces  Attached is a certificate isdiction under the law the translator must be s.  This document is exec	isary)  sof my position as registered agent.  (Registred gent)  (Registred gent)  (Registred gent)  (Registred gent)  (Registred gent)  (Registred gent)  (Appendix and Address:  Wayne Elsey  [1880 Woodcock Rd. #151]  (Orlando, El. 32803)  (Sary)	d, duly authen cate is in a fore	ticated by the official haveign language, a translationida Statutes. I am awareelony as provided for in s	Name and Address:  ving custody of records in on of the certificate under	the oath
(t 9. jur of 10	The name, title or cap  Title or Capacity:  MGR  See attachments if neces  Attached is a certificate isdiction under the law the translator must be s.  This document is exec	Registred agent.  (Registred agent.  (Agent)  (Registred agent.  (Registred agent.  (Registred agent.  (Registred agent.  (Agent)  (Registred agent.  (Registred agent.  (Registred agent.  (Agent)  (Registred agent.  (Agent)  (Registred agent.  (Registred agent.  (Registred agent.  (Agent)  (Registred agent.  (Regist	d, duly authen cate is in a for third degree for	ticated by the official haveign language, a translationida Statutes. I am aware clony as provided for in s	Name and Address:  ving custody of records in on of the certificate under	the oath

### STATE OF WYOMING Office of the Secretary of State

I, EDWARD A. BUCHANAN, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

## Head2Toe Recycling, LLC is a Limited Liability Company

formed or qualified under the laws of Wyoming did on October 9, 2018, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number 2018-000823893.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 11th day of October, 2018 at 8:05 AM. This certificate is assigned 028238228.

Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.