

MI8000011216

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

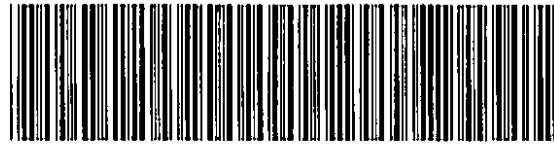
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

C0611 W18000063879
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12-3-18

Office Use Only



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2018 DEC 3 PM 12:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

U/S
12-13-18



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 12, 2018

BRYN WELLS
19366 SW 14TH ST
PEMBROKE PINES, FL 33029

SUBJECT: 8000 OLD KINGS LLC
Ref. Number: W18000063879

We have received your document for 8000 OLD KINGS LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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.

Brittany M Figueroa
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 718A00014401

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 8000 Old Kings 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:

Bryn Wells

Name of Person

8000 Old Kings LLC

Firm/Company

19366 SW 14th Street

Address

Pembroke Pines, FL 33029

City/State and Zip Code

brynwells@att.net

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

For further information concerning this matter, please call:

Bryn Wells

954

548-0962

at ()

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

Bryn Wells

19366 SW 14th Street | 954.548.0962 | bryn.wells@truckspotapp.com

11/21/2018

Janeice Smith

Division of Corporations Letter Number 718A00014401 BF

Dear Janeice Smith:

Please find the documentation that was requested during our conversation. The fee was previously sent so it is not enclosed this time. Feel free to reach out to me if there is anything else needed.

Sincerely,



Bryn Wells

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DEC-3 PM 12:19

COVER LETTER

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Division of Corporations**

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Please return all correspondence concerning this matter to the following:

Bryn Wells

Name of Person

8000 Old Kings LLC

Firm/Company

19366 SW 14th Street

Address

Pembroke Pines, FL 33029

City/State and Zip Code

bryn.wells@truckspotapp.com

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

For further information concerning this matter, please call:

Bryn Wells

954

548-0962

at ()

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 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. 8000 Old Kings 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. Delaware
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 83-0986937
(FEI number, if applicable)
4. October 1st, 2018
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 19366 SW 14th Street
(Street Address of Principal Office)
6. 19366 SW 14th Street
(Mailing Address)
- Pembroke Pines, FL 33029
Pembroke Pines, FL 33029

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

Name: Bryn Wells

Office Address: 19366 SW 14th Street

Pembroke Pines, Florida 33029
(City) (Zip code)

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 the 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.

[Signature]
(Registered agent's signature)

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TALLAHASSEE, FLORIDA

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:

President

Bryn Wells

19366 SW 14th Street

Pembroke Pines, FL 33029

FILED

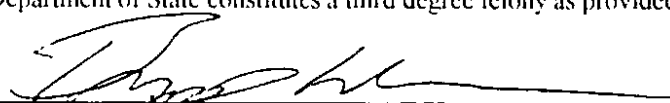
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(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.



Signature of an authorized person

Bryn Wells

Typed or printed name of signee

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "8000 OLD KINGS LLC" IS DULY FORMED
UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND
HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS
OF THE TWENTY-FIRST DAY OF NOVEMBER, A.D. 2018.



6940730 8300

SR# 20187768592

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JWB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 203952638

Date: 11-21-18