Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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From:	Account Name : C T CORPORA Account Number : FCA00000002 Phone : (514)280-33 Fax Number : (954)208-08	3 38	rniz-o ssee, fil
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Corporate Filing Menu

Help

Electronic Filing Menu

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

1	Sunstate Equipme		<u> </u>
(Name of Foreign	imited Liability Company; must include "L mit	ed Liability Company," "L L.C., or "LLC."	
If mount anywailable, anter alternate m	one adopted for the purpose of manuscring business in Fl	oricle. The alternace name need include "I arrited Un	billity Commeny," "LLC," or "LLC.")
Delaware		3 86-0810251	
(Jurisdiction unites the few of w)	ich foreign firmtzil liability company is organizad)	(PE) num	ber, if applicable)
N/A no business yet			
	(Date first transacted business in Florida, If price to (See routions 505 0904 & 605 0905, P.S. to determ		2019 FEB
5, 5552 E. Wushingtion S	i	6. 5552 E. Washingtion St.	<u> </u>
(Street Address of Phoenix, AZ 85034	nincipal Office)	Phoenix, AZ 85034	
THOCHA, AL SOOT			
			(n = 15)
7 Name and street address	a of Florida registered agent: (P.O. Bo	x NOT acceptable)	SSEE. F. P. IV.
	C T Corporation System	<del></del>	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
Name:		<del> </del>	무실 5
Office Address:	. 1200 South Pine Island Road		(m) <b>—</b>
	Plantation	, Florida 33324 (Zip $\infty$	<del></del>
Registered agent's accep	(Clry)	. (Zip co	de)
to comply with the provis	ious of all statutes relative to the propi	as registered agent and agree to use or and complete performance of my	
to comply with the provis	tion, I hereby accept the appointment font of all statutes relative to the propi 3 of my position as registered agent. By: CT Corporation System	as registered agent and agree to ut er and complete parformance of my	duties, and I am familiar with
to comply with the provis	ions of all statutes relative to the propi 3 of my position as registered agent.  C.T. Comomico System	er and complete performance of my	duties, and I am familiar with
to comply with the provis and accept the obligation	ions of all statutes relative to the propi 3 of my position as registered agent. By: CT Corporation System	r and complete performance of my  Kir	nberly Laughrey, Asst Sec
to comply with the provis and accept the obligation 8. The name, title or cap	ions of all statutes relative to the propis s of my position as registered agent.  By: CT Corporation System  (Registered agent  (Registered agent)  acity and address of the person(s) who  Name and Address:  Garth Price	r and complete performance of my  Kir s square)  has/have authority to manage ls/are:	nberly Laughrey, Asst Sec
to comply with the provis and accept the obligation 8. The name, title or cap Title or Canneity:	ions of all statutes relative to the propis of my position as registered agent.  By: C T Corporation System  (Registered agent)	r and complete performance of my  Kir s square)  has/have authority to manage ls/are:	nduries, and I am familiar with mberly Laughrey, Asst Sec
to comply with the provis and accept the obligation 8. The name, title or cap Title or Canneity:	ions of all statutes relative to the propis s of my position as registered agent.  By: CT Corporation System  (Registered agent  (Registered agent)  acity and address of the person(s) who  Name and Address:  Garth Price	r and complete performance of my  Kir s square)  has/have authority to manage ls/are:	nduries, and I am familiar with mberly Laughrey, Asst Sec
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to comply with the provise and accept the obligation  8. The name, title or cap Title or Canneity:  CFO	acity and address of the person(s) who Name and Address:  Garth Price  5552 F. Washingtion St. Phoenix. AZ 85034  Chris Watts  5552 E. Washingtion St.	r and complete performance of my  Kir s square)  has/have authority to manage ls/are:	nberly Laughrey, Asst Sec
to comply with the provisand accept the obligation  8. The name, title or cop Title or Canneity: CFO CEO	acity and address of the person(s) who Name and Address:  Carth Price  5552 E. Washington St. Phoenix. AZ 85034  Chris Watts  5552 E. Washington St. Phoenix. AZ 85034	r and complete performance of my  Kir s square)  has/have authority to manage ls/are:	nberly Laughrey, Asst Sec
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8. The name, title or cap Title or Canneity: CFO  CEO  (Use attachments If nece	acity and address of the person(s) who Name and Address:  Garth Price  5552 E. Washington St. Phoenix. AZ 85034  Chris Watts  5552 E. Washington St. Phoenix. AZ 85034  St. Phoenix. AZ 85034  Chris Watts  6552 E. Washington St. Phoenix. AZ 85034  Chris Watts  6552 E. Washington St. Phoenix. AZ 85034  Chris Watts  6555 E. Washington St. Phoenix. AZ 85034  Chris Watts  6555 E. Washington St. Phoenix. AZ 85034  Chris Watts  6555 E. Washington St. Phoenix. AZ 85034	t duly authenticated by the official	Name and Address:    Name and Address:
8. The name, title or cap Title or Canneity: CFO  CEO  (Use attachments if nece 9. Attached is a certificat jurisdiction under the law of the translator must be	acity and address of the person(s) who Name and Address:  Garth Price  5552 E. Washington St. Phoenix. AZ 85034  Chris Watts  5552 E. Washington St. Phoenix. AZ 85034  St. Phoenix. AZ 85034  Chris Watts  6552 E. Washington St. Phoenix. AZ 85034  Chris Watts  6552 E. Washington St. Phoenix. AZ 85034  Chris Watts  6555 E. Washington St. Phoenix. AZ 85034  Chris Watts  6555 E. Washington St. Phoenix. AZ 85034  Chris Watts  6555 E. Washington St. Phoenix. AZ 85034	the duly authenticated by the official state is in a foreign language, a transition of (1) (b). Florida Statutes, I am aways	Name and Address:  Name and Address:  having custody of records in the ation of the certificate under oath
8. The name, title or cap Title or Canneity: CFO  CEO  (Use attachments if nece 9. Attached is a certificat jurisdiction under the law of the translator must be	dons of all statutes relative to the proposes of my position as registered agent.  By:  C T Corporation System  (Registered agent.  (Registered ag	the duly authenticated by the official state is in a foreign language, a transition of (1) (b). Florida Statutes, I am aways	nberly Laughrey, Asst Secondary Laughrey,



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SUNSTATE EQUIPMENT CO., 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 TWELFTH DAY OF FEBRUARY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

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

2567201 8300

SR# 20190922457

Authentication: 202244040

Date: 02-12-19