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(Address)

(City/State/Zip/Phone #)

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SECTION

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302

155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 2/26/19

NAME: NRC PROPERTIES LLC

TYPE OF FILING: APPLICATION

COST: 160.00

RETURN: CERTIFIED COPY AND GOOD STANDING PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NRC PROPERTIES 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:

NATHAN R. JENSEN
Name of Person

NRC PROPERTIES LLC
Firm/Company

47289 298th STREET
Address

BERESTFORD, SD 57004
City/State and Zip Code

NRC PROPERTIES 2018 @ GMAIL . COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NATHAN JENSEN at (605) 214-6057
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:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ **EO 01** \$125.00 Filing Fee

☐ **EO 01** \$130.00 Filing Fee &
Certificate of Status

☐ **EO 01** \$155.00 Filing Fee &
Certified Copy

☒ **EO 01** \$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. NRC PROPERTIES 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. SOUTH DAKOTA
(Jurisdiction under the law of which foreign limited liability company is organized)

3. _____
(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. 47289 298th St.
(Street Address of Principal Office)

6. 47289 298th St.
(Mailing Address)

Beestford, SD 57004

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CLERK OF DISTRICT COURT
JACKSONVILLE, FLORIDA

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

Name: PARAGON DOCUMENT RESEARCH INC.

Office Address: 155 OFFICE PLAZA DR. #A

TALLAHASSEE, Florida 32301
(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 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.

J. J. Mosier, es. agent for Paragon Document
(Registered agent's signature)

B. For initial meeting purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage (up to six (6) total):

Title or Capacity:		Name and Address:		Title or Capacity:		Name and Address:	
<input type="checkbox"/> Manager	Name:	<u>William D. Jensen</u>		<input type="checkbox"/> Manager	Name:	<u>William A. Jensen</u>	
<input type="checkbox"/> Member	Address:	<u>47209 298th St</u>		<input checked="" type="checkbox"/> Member	Address:	<u>47209 298th St</u>	
<input type="checkbox"/> Authorized		<u>Perseus, SD 57004</u>		<input type="checkbox"/> Authorized		<u>Perseus, SD 57004</u>	
Person				Person			
<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other	
<input checked="" type="checkbox"/> Manager	Name:	<u>Nathan R. Jensen</u>		<input type="checkbox"/> Manager	Name:		
<input type="checkbox"/> Member	Address:	<u>29843 472nd Ave</u>		<input type="checkbox"/> Member	Address:		
<input type="checkbox"/> Authorized		<u>Perseus, SD 57004</u>		<input type="checkbox"/> Authorized			
Person				Person			
<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other	
<input type="checkbox"/> Manager	Name:			<input type="checkbox"/> Manager	Name:		
<input type="checkbox"/> Member	Address:			<input type="checkbox"/> Member	Address:		
<input type="checkbox"/> Authorized				<input type="checkbox"/> Authorized			
Person				Person			
<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other	

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 TALLAHASSEE, FL
 STATE

Insurance Policy. This is an attachment to your return and is not to be filed with your Florida Department of State Annual Report form. Non-attached information may be added in the future when filing your Florida Department of State Annual Report form.

A certificate of incorporation or other document, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction in which the corporation is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be filed.)

I, the undersigned, in connection with my duties with respect to this (2019) (T) (C), Florida Statute, I am aware that any false information submitted to the Department of State constitutes a third degree felony as provided for in s. 817.13, F.S.

Nathan R. Jensen
 Signature of authorized person
Nathan R. Jensen
 Printed name of authorized person

State of South Dakota

Office of the Secretary of State

Certificate of Good Standing

Domestic Limited Liability Company

I, **Steve Barnett**, Secretary of State of the State of South Dakota, hereby certify that

NRC PROPERTIES, L.L.C.

Business ID: DL020990

was authorized to transact business in this state on: March 15, 2010.

I, further certify that **NRC PROPERTIES, L.L.C.** has complied with the laws of this State relative to the formation of Certificate of Good Standing/Authorizations of its kind and is now regularly and properly organized and existing under the laws of this State and is in Good Standing, as shown by the records of this office. This certificate is not to be construed as an endorsement, recommendation or notice of approval of its financial condition or business activities and practices. Such information is not available from this office.



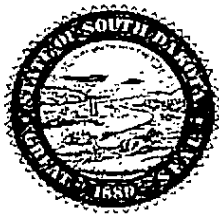
IN TESTIMONY WHEREOF, I have hereunto set my hand and caused to be affixed the Great Seal of the State of South Dakota, in Pierre, the Capital City, this day, February 20, 2019.

Steve Barnett

Steve Barnett
Secretary of State

02/20/2019 4:51 PM

Verification #: 011474935



OFFICE OF THE SECRETARY OF STATE

STEVEN J. BARNETT, SECRETARY OF STATE

JASON LUTZ, DEPUTY SECRETARY OF STATE

NATHAN JENSEN
29843 473RD AVE.
BERESFORD, SD 57004

February 20, 2019

Request Type: Certificate of Good Standing/Authorization

Request #: 0144581

Issuance Date: 02/20/2019

Copies Requested: 1

Document Receipt

Receipt #: 001451615

Filing Fee: \$20.00

Payment-Credit Card - NATHAN JENSEN, BERESFORD, SD #: 0108379435

\$20.00

Regarding: NRC PROPERTIES, L.L.C.

Filing Type: Domestic Limited Liability Company

Business ID : DL020990

Formation/Qualification Date: 03/15/2010

Date Formed: 03/15/2010

Status: Good Standing

Formation Locale: SOUTH DAKOTA

Duration Term: Perpetual

Inactive Date:

Business County:
