

M19000003450

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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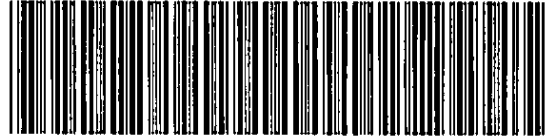
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2019 APR -1 PM 2:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

04/15/19 ✓  
1/5



SpencerFane

LORI ARNOLD, PARALEGAL  
DIRECT DIAL: 816.292.8243  
larnold@spencerfane.com

File No. 5028895.1

March 29, 2019

**VIA FEDEX FIRST OVERNIGHT**

Florida Department of State  
Division of Corporations, Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**Re: M.A. Metal Resources – Foreign LLC Application**

Dear Clerk:

Enclosed please find an Application By Foreign Limited Liability Company for Authorization to Transact Business in Florida for the above-referenced entity.

Our client is under a very tight deadline. If this application can be filed today, it would be greatly appreciated.

Also enclosed is a firm check in the amount of \$125.00 to cover the filing. Additionally, I have included a self-addressed postage-prepaid FedEx envelope for returning the file-stamped copy of the filing to be returned to our offices.

Thank you for your help, and please call me if you have any questions or comments regarding this matter.

Sincerely,

Lori Ann Arnold, Paralegal

LAA/akj  
Enclosures

FILED  
2019 APR -1 PM 2:41  
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: M.A. Metal Resources, 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:

Lori Arnold  
Name of Person

Spencer Fane LLP  
Firm/Company

1000 Walnut Street, Suite 1400  
Address

Kansas City, MO 64106  
City/State and Zip Code

larnold@spencerfane.com  
E-mail address: (to be used for future annual report notification)

FILED  
2019 APR -1 PM 2:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Lori Arnold at ( 816 ) 292-8243  
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**

☒ \$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. M.A. Metal Resources, 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. Kansas  
(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. 9225 Indian Creek Parkway  
(Street Address of Principal Office)

6. 9225 Indian Creek Parkway  
(Mailing Address)

Suite 670

Suite 670

Overland Park, KS 66210

Overland Park, KS 66210

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

Name: Spenserv, Inc.

Office Address: 201 North Franklin Street, Suite 2150

Tampa

(City)

Florida 33602-5627

(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.

Justin Leck

(Registered agent's signature)

Justin Leck, Vice President of Spenserv, Inc.

FILED  
2019 APR - 1 PM 2:41  
TAMPA, FLORIDA

8. For initial indexing 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:

☒ Manager      Name: Michael A. Sorcher

☐ Member      Address: 9225 Indian Creek Pkwy., #670

☐ Authorized      Overland Park, KS 66210

Person \_\_\_\_\_

☐ Other \_\_\_\_\_      ☐ Other \_\_\_\_\_

☒ Manager      Name: Robert L. Smith, Jr.

☐ Member      Address: 9225 Indian Creek Pkwy., #670

☐ Authorized      Overland Park, KS 66210

Person \_\_\_\_\_

☐ Other \_\_\_\_\_      ☐ Other \_\_\_\_\_

☐ Manager      Name: \_\_\_\_\_

☐ Member      Address: \_\_\_\_\_

☐ Authorized      \_\_\_\_\_

Person \_\_\_\_\_

☐ Other \_\_\_\_\_      ☐ Other \_\_\_\_\_

Title or Capacity:                      Name and Address:

☒ Manager      Name: Jill D. Sorcher

☐ Member      Address: 9225 Indian Creek Pkwy., #670

☐ Authorized      Overland Park, KS 66210

Person \_\_\_\_\_

☐ Other \_\_\_\_\_      ☐ Other \_\_\_\_\_

☐ Manager      Name: \_\_\_\_\_

☐ Member      Address: \_\_\_\_\_

☐ Authorized      \_\_\_\_\_

Person \_\_\_\_\_

☐ Other \_\_\_\_\_      ☐ Other \_\_\_\_\_

☐ Manager      Name: \_\_\_\_\_

☐ Member      Address: \_\_\_\_\_

☐ Authorized      \_\_\_\_\_

Person \_\_\_\_\_

☐ Other \_\_\_\_\_      ☐ Other \_\_\_\_\_

**Important Notice:** Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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

Michael D. Sorcher

\_\_\_\_\_  
Typed or printed name of signer

**STATE OF KANSAS  
OFFICE OF  
SECRETARY OF STATE  
SCOTT SCHWAB**

I, SCOTT SCHWAB, Secretary of State of the state of Kansas, do hereby certify, that according to the records of this office.

Business Entity ID Number: 8815508

Entity Name: M.A. METAL RESOURCES, LLC

Entity Type: DOM: LTD LIABILITY COMPANY

State of Organization: KS

Resident Agent: SPENSERV, INC.

Registered Office: 9401 Indian Creek Parkway Building 40, Suite 700, OVERLAND PARK, KS 66210

was filed in this office on October 24, 2017, and is in good standing, having fully complied with all requirements of this office.

No information is available from this office regarding the financial condition, business activity or practices of this entity.



In testimony whereof I execute this certificate and affix the seal of the Secretary of State of the state of Kansas on this day of March 28, 2019

**SCOTT SCHWAB  
SECRETARY OF STATE**

Certificate ID: 1097452 - To verify the validity of this certificate please visit <https://www.kansas.gov/bess/flow/validate> and enter the certificate ID number.