

M19000003994

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

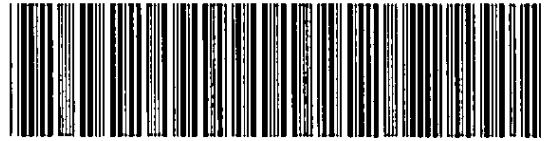
Special Instructions to Filing Officer:

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: T&H Services, 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:

Tricia Echelberger

Name of Person

Tlingit Haida Tribal Business Corporation/T&H Services, LLC

Firm/Company

2595 Canyon Blvd. Suite 240

Address

Boulder, CO 80302

City/State and Zip Code

pechelb@thtbc.com

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

For further information concerning this matter, please call:

Tricia Echelberger

720
at ()

399-2445

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. T&H Services, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

~~T&H Services of Florida-~~ T&H Services LLC of Florida

(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. Tribal Law of CCTHITA 46-5060883
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 1.31.2019
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 4208 198th St SW
(Street Address of Principal Office)

6. 4208 198th St SW
(Mailing Address)

Suite 104

Suite 104

Lynnwood, WA 98036

Lynnwood, WA 98036

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

Name: Business Filings Incorporated

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(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.

Andria Garbago Asst Sec. Business Filings Incorporated
(Registered agent's signature)

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TALLAHASSEE, FLORIDA

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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: Richard Rinehart
☐ Member Address: 4208 198th ST SW
☐ Authorized Suite 104
Person Lynnwood, WA 98036
☐ Other ☐ Other

☐ Manager Name: _____
☐ Member Address: _____
☐ Authorized _____
Person _____
☐ Other ☐ Other

☐ Manager Name: _____
☐ Member Address: _____
☐ Authorized _____
Person _____
☐ Other ☐ Other

Title or Capacity: **Name and Address:**

☐ Manager Name: _____
☐ Member Address: _____
☐ Authorized _____
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)

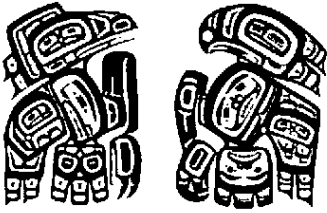
10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Richard Rinehart

Signature of an authorized person

Richard Rinehart

Typed or printed name of signer



CENTRAL COUNCIL
Tlingit and Haida Indian Tribes of Alaska
[Department Name] • Edward K. Thomas Building
9097 Glacier Highway • Juneau, Alaska 99801

March 29, 2019

RE: Certificate of Existence of T & H Services LLC

To Whom It May Concern:

Please accept this letter as certification of the existence of T & H Services LLC. T & H Services LLC existence is complete and has been on file since February 18, 2014 with the Central Council of Tlingit and Haida Indian Tribes of Alaska, which is a federally recognized tribe. T & H Services LLC is licensed to do business under our tribal code.

If you have any questions, please contact T & H Services LLC, Manager, Richard Rinehart at rrinehart@thtbc.com or 425-361-1060.

A handwritten signature in black ink, appearing to read "Ralph Wolfe".

Ralph Wolfe, Tribal Secretary
Central Council of the Tlingit Haida Indian Tribes of Alaska



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 4, 2019

TRICIA ECHELBERGER
2595 CANYON BLVD
STE 240
BOULDER, CO 80302 US

SUBJECT: T&H SERVICES LLC OF FLORIDA
Ref. Number: W19000034504

We have received your document for T&H SERVICES LLC OF FLORIDA and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

The jurisdiction under the laws of which the entity is incorporated or organized must be included in the document.

Please return 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.

Zakiya M Brown
Regulatory Specialist II

Letter Number: 619A00006748

SORRY FOR THE ERROR
I HAVE ENCLOSED THE DOCUMENT
JUCIA
720-399 2445