1119000004172

(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:
W19-33674 unns form & due

Office Use Only



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03/27/19--01015--001 **70.00

04/25/19--01015--009 **55.00

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08/25/19



April 3, 2019

ROBERT HUNT 8315 E BRONCO TRAIL SCOTTSDALE, AZ 85255

SUBJECT: TANDEN ENTERPRISES LLC

Ref. Number: W19000033674

We have received your document for TANDEN ENTERPRISES LLC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is a balance due of \$55.00.

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

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.

Letter Number: 219A00006606

Octavia L Simmons Regulatory Specialist III

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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Kanden Enterphises 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:
Robert Hunt Name of Person
Tanden Enterprises LLC
8315 E. Bronco Tigil
Scottsdale AZ 85255 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Robert Hun Tat (480) 319-1456 Name of Contact Person Area Code Daytime Telephone Number
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FI, 32301
Enclosed is a check for the following amount:
Please make check payable to: FLORIDA DEPARTMENT OF STATE \$\int \frac{1}{2} \

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

	FCTION 605,0902, FLORIDA STATE BUSINESS IN THE STATE OF FLO gn Limited Liability Company, must			
1	ie name adopted for the purpose of transact	-		
(Jurisdiction under the law of	(Wat HE (which foreign limited liability company is	s organized)) - 1404 (FEI number, if	applicable)
		n Florida, sf prior to registration.) 905, F.S. to determine penalty liability.)		
	DE. Fletche OFFINICIPAL Office) DA Fl 33			
. Name and <u>street addi</u> Name:	ress of Florida registered ager	nt: (P.O. Box <u>NOT</u> acceptab	ole)	FILE 19 APR 19
Office Address	Jamba P	1 33637.		RH 5: 17

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.

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]: Name and Address: Title or Capacity: Title or Capacity: Manager Manager Member Member Address: Authorized Person Person Other_ Other _ Other_ Manager Manager Address: 73)0 F. Fletchet Member Member Authorized ☐ Xuthorized Person Person Other_____ Other_ Other Name: Scott Petterson Manager Manager | Member Member Authorized Person Person Other____ 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



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "TANDEN ENTERPRISES 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 MARCH, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TANDEN ENTERPRISES LLC" WAS FORMED ON THE THIRD DAY OF MAY, A.D. 2017.

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

Authentication: 202420605

6399201 8300 SR# 20191902925