

M19000000935

(Requestor's Name)

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(City/State/Zip/Phone #)

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 5, 2019

MICHAEL HOLLORAN  
8615 COMMODITY CIRCLE, STE 8  
ORLANDO, FL 32819

SUBJECT: HOLLORAN ENTERPRISES, L.L.C.  
Ref. Number: W19000077471

We have received your document for HOLLORAN ENTERPRISES, L.L.C. and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

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.

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.

Brooke N Kinsey  
Regulatory Specialist II

Letter Number: 719A00018302



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 21, 2019

MICHAEL HOLLORAN  
8615 COMMODITY CIRCLE, STE 8  
ORLANDO, FL 32819

SUBJECT: HOLLORAN ENTERPRISES, L.L.C.  
Ref. Number: W19000077471

We have received your document for HOLLORAN ENTERPRISES, L.L.C. and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

PLEASE ASSIGN A TITLE TO THE AUTHORIZED MEMBER,

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.

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.

Brooke N Kinsey  
Regulatory Specialist II

Letter Number: 919A00017254

RECEIVED

SEP 03 2019

COVER LETTER

TO: Registration Section  
Division of Corporations

Holloran Enterprises, L.L.C

SUBJECT:

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Ge  
Existence, and check are submitted to register the above referenced foreign limited liability company to transact business

Please return all correspondence concerning this matter to the following:

Michael Holloran

Name of Person

Firm/Company

8615 Commodity Circle, Ste 3

Address

Orlando, FL 32815

City/State and Zip Code

help@roofingorl.com

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

For further information concerning this matter, please call:

Michael Holloran

Name of Contact Person

at ( 636 )

Area Code

445-4925

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, Certi  
of Status & Certified Cop

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

IN COMPLIANCE WITH SECTION 605.092, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Holloran Enterprises, 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. Missouri

(Jurisdiction under the law in which foreign limited liability company is organized)

3. 53-1516389

(FEI number, if applicable)

4. (Date last transacted business in Florida, if prior to registration)  
(See sections 605.0901 & 605.0905, F.S. to determine penalty liability)

5. 8615 Commodity Circle, Ste 8

(Street Address of Principal Office)

Orlando, FL 32819

6. 8615 Commodity Circle, Ste 8

(Mailing Address)

Orlando, FL 32819

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

Name: Michael Holloran

Office Address: 8615 Commodity Circle, Ste 8

Orlando

(City)

Florida 32819

(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 as the person 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.

(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons managing (up to six (6) total):

Title or Capacity:

Name and Address:

☐ Manager

Name: Michael Holloran

☒ Member

Address: 8615 Commodore Circle

☐ Authorized

Sie S. Orlando, FL 32819

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

☐ 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. No 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 jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under 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 Holloran

Typed or printed name of signer

2019 SEP 30 PM 4:13

# STATE OF MISSOURI



**John R. Ashcroft**  
**Secretary of State**

CORPORATION DIVISION  
CERTIFICATE OF GOOD STANDING

I, JOHN R. ASHCROFT, Secretary of State of the STATE OF MISSOURI, do hereby certify that the records in my office and in my care and custody reveal that

*Holloran Enterprises, LLC*  
*LC001604086*

was created under the laws of this State on the 9th day of August, 2018, and is active, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 30th day of September, 2019.

  
Secretary of State



Certification Number: CERT-09302019-0029