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Office Use Only



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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



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

RECENTED SEP 0.3 and

### 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 Fiorida," 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 \_Eirm/Company \_\_\_ 8615 Commodity Circle, Ste 3 Address Orlando, FL 32819 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 at ( 636 Name of Couract Person Area Code Daytime Telephone Number MAILING ADDRESS: STREET ADDRESS: Division of Corporations Registration Section Division of Corporations P.O. Box 6327 Registration Section Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Taliahassee, FL 32301 Enclosed is a check for the following amount: Picese make check payable to: FLORIDA DEPARTMENT OF STATE S125.00 Filing Fee □ \$130.00 Filing Fee & S155.00 Filing Fee & Si 50.00 Filing Fee, Certi Certificate of Status Certified Copy of Status & Certified Cop

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACTED IN PLORIDA

| Outstands under the law or which foreign lamost limitary correcting is required.  (Done from transacted business in Florida, if oner to registration.)  (See rections 605.0901 & 605.0905, F.5 to determine penalty limitary)  8615 Commodity Circle. Site 8  (Secret Andrews of Frincipal Office)  6. Whit Commodity Circle, Size 8  (Mailing Address)  Orlando, FL 32819   | The description of the law of which foreign lambed leading company in agreement.  (See rections 60.000 to  | Holbær Esterprices Li  | UC  |                    | G IS SUBMITTED TO REGISTER A FO              |  |
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|  | Ered agent's account   | fame and street address  | s of Florida registered agent: (P.O. Box <u>NO</u>  |                    | Plabie)                                      | •                                      |
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| tod in this application of the accept service of process for the above rected by the con-  | ated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I fur<br>ply with the provisions of all statutes relative to the proper and committee and agree to act in this capacity. I fur  | Name:  Office Address:  tered agent's eccepta g been named as regi | Michael Holtoran  8515 Commodity Circle, Sur 8  Orlando  (Circ)  nce:  stered agent and to accept service of process. | s for the          | Florida 32819  (Zep sode)                    | empany a:<br>acity. I fur              |
| tod in this application of the accept service of process for the above rected by the con-  | ated in this application. I hereby accept the appointment as registered agent and agree to act in this company at a<br>ply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiate of the obligations of my position assessing agent.   | Name:  Office Address:  tered agent's eccepta g been named as regi | Michael Holtoran  8515 Commodity Circle, Sur 8  Orlando  (Circ)  nce:  stered agent and to accept service of process. | s for the          | Florida 32819  (Zep sode)                    | mpany a:<br>scity. I fur<br>L'am fami, |
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| Manager  | Name: Michael Holloran   | Title of Capi  | <u> विकास धर</u>  |
| Member   | Address: 8615 Commodity Circle   | — 🔲 Manager  | .Varne:   |
|  | Ste S. Orlando, FL 32819   | → ☐ Member  — ☐ Authorized                                 | Address:  |
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|  |  | n apported better  |   |

STATE OF MISSOUR



## 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 Stale

Certification Number: CERT-09302019-0029

