

N1900000955

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

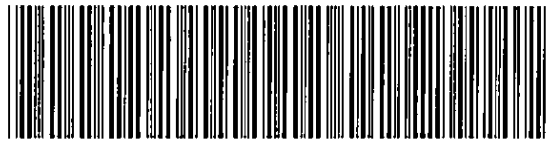
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000335596340

10/09/19--01006---001 **160.00

19 OCT -- 9 AM 8:58

Y SCOTT
OCT 09 2019

FILED
2019 OCT -9 AM 9:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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. BJP Properties, L.L.C.
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
2. Hawaiian Tropical Twist, L.L.C.
(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.")
3. Missouri
(Jurisdiction under the law of which foreign limited liability company is organized)
4. 86106635
(FBI number, if applicable)
5. 4008 S. Belvedere Ct.
(Street Address of Principal Office)
6. Same
(Mailing Address)
7. Springfield, MO
65807

FILED
2019 OCT -9 AM 9:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Name: Brad Petersen

Office Address: 2943 Gaslight Dr.

South Daytona, Florida 32119
(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.

Brad Petersen
(Registered agent's signature)

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: Brad Petersen

☒ Member Address: 4008 S. Belvedere Ct

☐ Authorized Springfield mo

Person 65807

☐ Other ☐ Other

Title or Capacity: Name and Address:

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other ☐ Other

FILED
2019 OCT -9 AM 9:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

☐ 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. 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.

Brad Petersen
Signature of an authorized person

Brad Petersen
Typed or printed name of signee

STATE OF MISSOURI



John R. Ashcroft
Secretary of State

CORPORATION DIVISION
CERTIFICATE OF GOOD STANDING

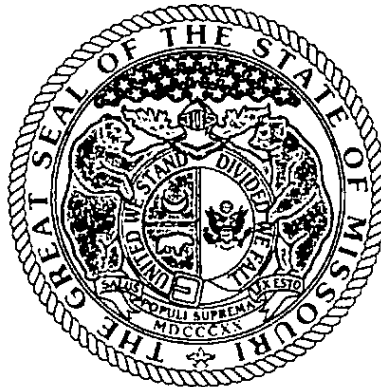
I, JOHN R. ASHCROFT, Secretary of State of the STATE OF MISSOURI, do hereby certify that the records in my office and in my care and custody reveal that

BJP Properties, L.L.C.
LC0522363

was created under the laws of this State on the 21st day of May, 2003, 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 4th day of October, 2019.


Secretary of State



Certification Number: CERT-10042019-0015

2019 OCT -9 AM 9:23
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

FILED