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(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: Call Mr. Randal GARE Remission to fait Confrance on Line 2 to market cus 10/4/4	9
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Office Use Only



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SECALIARY OF STATE
TALLAHASSEE, FLORIDA

Y SCOTT 0CT 1 9 2019





October 15, 2019

RONALD J. CASACCHIA 7554 CORIANDER CT. JACKSONVILLE, FL 32244

SUBJECT: A1A AUTO & TRUCK, LLC

Ref. Number: W19000091325

We have received your document for A1A AUTO & TRUCK, LLC 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.

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: 119A00021182

Yvette Scott Document Specialist II

www.sunbiz.org

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: MARCO DAY TOUCH CCC	
Name of Limited Liability Company	
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certi Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in	ficate Flor
Please return all correspondence concerning this matter to the following:	ť
Name of Person For B	,
Name of Person	
Name of Person Firm/Company Firm/Company Address Firm/State and Zin Code City/State and Zin Code	
Firm/Company	i 4
7554 Cariander Ci Address	و _م ر
Address P	
City/State and Zip Code	
City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
or further information concerning this matter, please call:	
Name of Contact Person at (815) SC3-5257 Name of Contact Person Area Code Daytime Telephone Number	
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, FL 32301	
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMENT OF STATE	
\$125.00 Filing Fee \$\Bigcup \text{\$\sum_{\text{\$130.00}}} Filing Fee & Bound Substitutes Substit	

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: A Auto & Truck

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L. L.C.," or "LLC.") (It 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" by (Junsdiction under the law of which foreign limited hability company is organized) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Office Address: 70 c 1/2 Florida 32244 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. (Registered agent's signature)

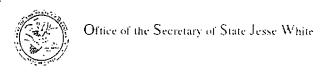
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to

itle or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
Manager	Name: Franté Coscolos	Manager	Name:
]Member	Address: 150 Po Brown Live in	Member	Address:
Authorized	Tings1 - IL 60193	Authorized	
Person		Person	
Other	Other	Other	TALE CONTROL OF THE C
Manager	Name:	Manager	Name: 852 6
Member	Address:	☐ Member	Address: P
Authorized		Authorized	LORAL L: H
Person		Person	
Other	Other	Other	Other
Manager	Name:	☐ Manager	Name:
Member	Address:	☐ Member	Address:
Authorized		Authorized	
Person		Person	
Other	Other	Other	Other

Signature of an authorized person

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.



CYBERDRIVEILLINOIS. COM

Corporation/LLC Search/Certificate of Good Standing

LLC File Detail Report

File Number

05937566

Entity Name

A14 AUTO & TRUCK, LLC

Status

ACTIVE

Entity Information

Principal Office

13570 BASE LINE RD.

KINGSTON, IL 601450000

Entity Type

LLC

Type of LLC

Domestic

Organization/Admission Date

Sunday, 28 August 2016

Jurisdiction

Duration

PERPETUAL

Agent Information

Name

UNITED STATES CORPORATION AGEN

Address

500 N MICHIGAN AVE STE 600

CHICAGO, IL 60611

Change Date

Sunday, 28 August 2016

Annual Report

For Year

2019

Filing Date

Saturday, 14 September 2019

Managers

Name Address CASACCHIA, RONALD 13570 BASE LINE RD

KINGSTON, IL 60145

Series Name

NOT AUTHORIZED TO ESTABLISH SERIES

Return to Search

(One Certificate per Transaction)

File Annual Report

Adopting Assumed Name

Articles of Amendment Effecting A Name Change

Change of Registered Agent and/or Registered Office

This information was printed from www.crberdriveilinois.com, the official website of the Illinois Sacretary of State's Office

Mon Sep 16 2019

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Attri. Yvette File Number

0593756-6



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do Rereby certify that I am the keeper of the records of the Department of Business Services. I certify that

ATA AUTO & TRUCK, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON AUGUST 28, 2016, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 15TH day of OCTOBER A.D. 2019 .

Authentication #: 1928801588 verifiable until 10/15/2020
Authenticate at; http://www.cyberdriveillinois.com

Desse White

SECRETARY OF STATE

850-245-6030