# M2000000220

(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
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#### **COVER LETTER**

TO: Registration Section Division of Corporation	ons	
SUBJECT: City	Floors & More LLC Name of Limited Liability Company	<del></del>
	oreign Limited Liability Company for Authorization to Transact Busine ted to register the above referenced foreign limited liability company to	
Please return all correspondence of	concerning this matter to the following:	
	Name of Person	
	LITY Floors & MORE LLC	· ————
_8118_	Statewille Boad ste Co	<del></del>
Charl	6He, NC 28269 City/State and Zip Code	
Acconts	S Paigner (A city-flows and Maxe. Com E-mail address: (to be used for future annual report notification)	
For further information concerning	ing this matter, please call;	
Mary Ela Name o	of Contact Person at (Area Code)  Area Code Daytime Telepho	one Number 2
Maiting Address: Registration Section Division of Corporat P.O. Box 6327 Tallahassee, FL 323 Enclosed is a check for t	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 the following amount:	RECEI
	able to: FLORIDA DEPARTMENT OF STATE  \$\times \sqrt{155,00} \text{ Filing Fee & } \tag{1} \\$155,00 \text{ Filing Fee & } \tag{2} \\$160.6	(X) Filing Fee, Certificate Status & Certified Copy

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

If name unavariable, enter alternate or	ame adopted for the purpose of transacting business in F	kviida. The alt	ernate name must incl	rule "Lamited Lashility Co.	mpany," "L.L.C,"	or LLC	')
2. North Ourisdiction under the law of wh	Carolina  is horrigon limited liability company is organized)	3	84-3	89 GO	cable)	_	
10/21/20	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905, F.S. to determ	registration )	bility)	<del></del>			
5. 811 8 States Street Address of Principal Office)	resulte Chood He G	6	G 808 (Marling Addres	ivalkas	6kn	D:	e Ni
Charlotte,	NC 28269		Concord,	NC 282	.69	2020 J	
7. Name and street address	of Florida registered agent: (P.O. Box	- NOT ac	ceptable)		100 100 100 100 100 100 100 100 100 100	AB - 6 Fill	
Name:	Cay Myles		<del></del>		35. 37.	25	\
Office Address:	4049 5 Drange 5	<u>Slaz</u>	mtol F				
	Orbido (Cny)		Florida _	32 830 (Zip code)	)		
designated in this applicate to comply with the provision	ance:  ristered agent and to accept service of fion, I hereby accept the appointment and so of all statutes relative to the proper of my position as registered agent.	s register and com	ed agent and ag	gree to act in this c	apacity. I fi	urther i	igree

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:

Title or Capacity:

Name and Address:

Manager

Name:

Manager

Name:

Manager

Name:

Manager

Name:

Manager

Name:

Manager	Name: Mary Elaine Morten	☐ ☐ Manager	Name: Cay Myles
□Member	Address: 9808 Walkers Olm D	Fa( <sup>2</sup> )Member	Address: 4049 SO range B1
□Authorized	Concord, Nr. 28027	Authorized	Orbido, PUL 3283
Person		Person	***
□Other	□Other	□Other	□Other
□Manager	Name: Francesca Modon	□Manager	Name: 28
□Member	Address: 9808 Walkers Colenton	ພ ⊡Member	Address:
Authorized	Corod, NC 28027	□Authorized	
Person		Person	3 -
□Other	Other	□Other	□Other 3 CD
□Manager	Name: Nicole Steele	□Manager	Name:
□Member	Address: Olo 30 Walkes Coleno	r ∧w⊟Member	Address:
☑/Authorized	Concod, NC 28027	☐ Authorized	
Person	<del></del>	Person	
□Other	□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

May Flaire Morton

Trust or crinted name of signer



# NORTH CAROLINA Department of the Secretary of State

## CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

### CITY FLOORS & MORE LLC

is a limited liability company duly formed, and existing under the laws of the State of North Carolina, having been formed on 24th day of October, 2018

I FURTHER certify that, as of the date of this certificate, (i) the said limited liability company is not dissolved under the terms of its articles of organization, (ii) the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina, (iii) that said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act, (iv) that this office has not filed any decree of judicial dissolution, articles of dissolution, articles of merger, or articles of conversion for said limited liability company.





IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 24th day of November, 2019,

Elaine J. Marshall

Secretary of State

Certification# 105865865-1. Reference# 15692393- Page: Lof 1



### FLORIDA DEPARTMENT OF STATE Division of Corporations

April 23, 2019

MARY ELAINE MORTON 2750 E W.T. HARRIS BLVD #314 CHARLOTTE, NC 28213 US

SUBJECT: CITY FLOORS & MORE LLC

Ref. Number: W19000039498

We have received your document for CITY FLOORS & MORE 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: 419A00008131

Zakiya M Brown Regulatory Specialist II

www.sunbiz.org