

5/8/2020

VISIT

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000137227 3)))



H200001372273ABCY

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850)521-0821
Fax Number : (850)558-1515

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

Foreign Limited Liability Company
GREEN CREATIVE LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

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H20000137227 3**COVER LETTER**

**TO: Registration Section
Division of Corporations**

SUBJECT: _____
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following.

Name of Person

Firm/Company

Address

City/State and Zip Code

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

For further information concerning this matter, please call.

Name of Contact Person at (_____) _____
Area Code Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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, Certificate of Status & Certified Copy

FILED
2020 MAY -8 PM 4:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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H20000137227 3**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. Green Creative LLC

(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "LLC," 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," "LLC," or "LLC.")

2. California

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

3. _____

(FEL number, if applicable)

4. _____

(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability.)7733 Forsyth Blvd FI 235. _____
(Street Address of Principal Office)7733 Forsyth Blvd FI 236. _____
(Mailing Address)Saint Louis, MO 63105-1806Saint Louis, MO 63105-18067. Name and street address of Florida registered agent. (P.O. Box NOT acceptable)

Name: _____

Corporation Service Company

Office Address: _____

1201 Hays StreetTallahassee

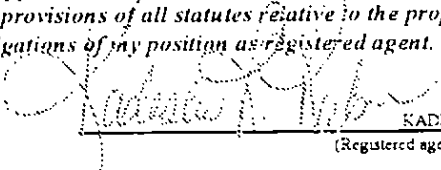
(City)

Florida32301

(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.


KADESHA ROBERSON ASST. VICE PRESIDENT

(Registered agent's signature)

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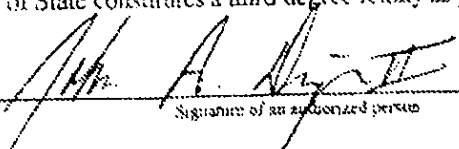
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage (up to six (6) total):

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input type="checkbox"/> Manager	Name: John A. Dinger II	<input type="checkbox"/> Manager	Name: Kenneth George Hawley
<input type="checkbox"/> Member	Address: 519 Codisco Way	<input type="checkbox"/> Member	Address: 519 Codisco Way
<input type="checkbox"/> Authorized	Sanford, FL 32771	<input type="checkbox"/> Authorized	Sanford, FL 32771
Person		Person	
<input checked="" type="checkbox"/> Other Chairman	<input type="checkbox"/> Other	<input checked="" type="checkbox"/> Other VP Sales	<input type="checkbox"/> Other
<input type="checkbox"/> Manager	Name: Michael P. Santoni	<input type="checkbox"/> Manager	Name:
<input type="checkbox"/> Member	Address: 7733 Forsyth Blvd.	<input type="checkbox"/> Member	Address:
<input type="checkbox"/> Authorized	Fl. 23	<input type="checkbox"/> Authorized	
Person	St. Louis, MO 63105	Person	
<input checked="" type="checkbox"/> Other VP, Treas., Sec.	<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other
<input type="checkbox"/> Manager	Name:	<input type="checkbox"/> Manager	Name:
<input type="checkbox"/> Member	Address:	<input type="checkbox"/> Member	Address:
<input type="checkbox"/> Authorized		<input type="checkbox"/> Authorized	
Person		Person	
<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> 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
 John A. Dinger II
 Typed or printed name of signer

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H20000137227 3**State of California**
Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME: GREEN CREATIVE LLC

FILE NUMBER: 201107510269
FORMATION DATE: 03/02/2011
TYPE: DOMESTIC LIMITED LIABILITY COMPANY
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

FILED
2020 MAY -3 PM 4:51
SECRETARY OF STATE
TALAHASSEE, FLORIDA

I, ALEX PADILLA, Secretary of State of the State of California,
hereby certify:

The records of this office indicate the entity is authorized to
exercise all of its powers, rights and privileges in the State of
California.

No information is available from this office regarding the financial
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this
certificate and affix the Great Seal
of the State of California this day of
May 4, 2020.

ALEX PADILLA
Secretary of State

SYD

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