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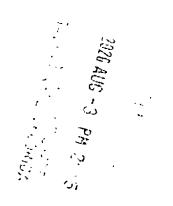
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COVER LETTER

TO:	egistration Section Division of Corporations	,	•	§ 4	•
SURI	National Latham Group, LLC				
(1.1.1.1		ne of Limited Liability Co	mpany		_
	nclosed "Application by Foreign Limited Liability ence, and check are submitted to register the above				
Please	e return all correspondence concerning this matter	to the following:			
	Jo Ellen Ballinger, Paralegal				
		Name of Person		•	_
	Lippes Mathias Wexler Friedman LL	.P			262
		Firm/Company			2620 AUG
	10151 Deerwood Park Boulevard, Bu	uilding 300, Suite 300			ි. ය
		Address			 P.H.
	Jacksonville, Florida 32256				2:1
		City/State and Zip Code		=;	ក្រ ប្រ
	cwalker@lippes.com				
	E-mail address: (to l	be used for future annual r	eport notification	on)	_
For fu	orther information concerning this matter, please c	all:			
	Jo Ellen Ballinger, Paralegal	904 at (660-0020 Ext	. 1506	
	Name of Contact Person	Area Code	Daytime T	elephone Number	-
Mailing Address: Registration Section Division of Corporations P.O. Box 6327		Street Address: Registration Sec Division of Cor			
			The Centre of Tallahassee		
	Tallahassee. FL 32314	2415 N. Monro Tallahassee, FL		e 810	
	Enclosed is a check for the following amount: Please make check payable to: FLORIDA DE \$\Bigsim \$125.00 \text{ Filing Fee} \Bigsim \$130.00 \text{ Filing F} Certificate	Fee & 🔲 \$155.00 Filin	ig Fee & 🛮 🗆	\$160.00 Filing Fee of Status & Ce	

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

IN COMPILANCE 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:

l. National Latham Group				
(Name of Foreign I	Limited Liability Company; must include "Limited	Liability	Company," "L.L.C.," or "LI.C.")	
(If name unavailable, enter alternate n	ame adopted for the purpose of transacting business in Flo	orida The	alternate name must include "Limited Lia	bility Company," "L.L.C," or "LLC
Delaware 2. (Invisidation under the line of wh	nich foreign limited liability company is organized)	3.	85-2254912	er, if applicable)
N/A	act a regulation and mornly company to eganteen		11211101110	is approximately
4.	(Date first transacted business in Florida, if prior to to (Sec sections 605,0904 & 605,0905, F.S. to determine	egistration ne penalty	ı) liability)	
16125 Lytham Drive			16125 Lytham Drive	2929 106
O. Street Address of Principal Office)			(Mailing Address)	<u> </u>
Odessa, Florida 33556			Odessa, Florida 33556	မိ
7 Name and street address	s of Florida registered agent: (P.O. Box	NOT :	acceptable)	2 5
7. Name and street address	g or Fronds registered agent. (1.0.100.		eceptable)	
Name:	Christopher Walker, Esq.			
Office Address:	10151 Deerwood Park Blvd., Bldg 300	, Ste 30	00	
	Jacksonville		32256 , Florida	
	(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.

DocuSigned by:		
Christopher	Walker	
F607626EB465490	(Registered agent's signature)	

Title or Capacity:	Name and Address:	Title or Capacit	<u>Y:</u>	Name and Address:
■Manager	Name: Andrew Winterkorn	□Manager	Name:	
∃Member	Address:	□Member	Address:	
□Authorized	Odessa, Florida 33556	□Authorized		
Person		Person		
Other	Other	Other	<u>.</u>	Other
∃Manager	Name:	□Manager	Name:	
□Member	Address:		Address:	
□Authorized		□Authorized		<u> </u>
Person		Person		
Other	Other	Other		
				(n
]Manager	Name:	_ □Manager	Name:	
∃Member	Address:	□Member	Address:	
]Authorized		□Authorized		
Person		Person		
□Other	Other	□Other		□Other
ndexed individuals O. Attached is a cert urisdiction under th of the translator mus 10. This document i	se an attachment to report more than six (6 may be added to the index when filing you ifficate of existence, no more than 90 days e law of which it is organized. (If the certist be submitted) s executed in accordance with section 605 ment to the Department of State constitutes	ur Florida Department of Stold, duly authenticated by the ficate is in a foreign languation of the control of t	tate Annual Rep the official havi age, a translation tes. I am aware	oort form. ng custody of records in n of the certificate under that any false information

Typed or printed name of signee

Andrew Winterkorn, Manager

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "NATIONAL LATHAM GROUP, LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE TWENTY-SEVENTH DAY OF JULY, A.D. 2020.

THE AUT OF E

Authentication: 203356202

Date: 07-27-20