

M2 000000 10066

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

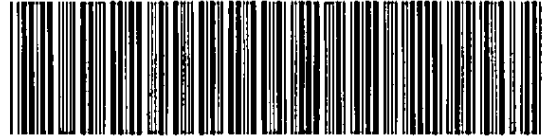
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300354061383

11/02/20--01031--002 \*\*160.00

2020/11/02 PM 3:02

5Bf  
11/6/20

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: VERMONT TERRA L.L.C.  
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:

TERRELL T. WALTON  
Name of Person

VERMONT TERRA L.L.C.  
Firm/Company

74 COTTON MILL HILL A327  
Address

BRATTLEBORO, VERMONT 05301  
City/State and Zip Code

info@motherssandals.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

STEVEN WALTON at (802) 490-2269  
Name of Contact Person 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

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. VERMONT TERRA L.L.C.  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," 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," "L.L.C.," or "LLC.")

2. VERMONT, USA  
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 56-2483271  
(FEI 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)

5. 74 COTTON MILL HILL  
(Street Address of Principal Office)

6. 74 COTTON MILL HILL  
(Mailing Address)

A 327

A 327

BRATTLEBORO, VT 05301

BRATTLEBORO, VT 05301

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

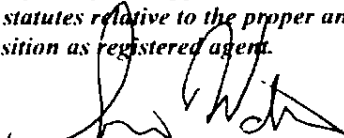
Name: STEVEN WALTON

Office Address: 6717 EASTON LANE

SARASOTA, FL, Florida 34238  
(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.

  
(Registered agent's signature)

2020-11-2 PM 3:12

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 checked="" type="checkbox"/> Manager	Name:	TERRELL T. WALTON		<input type="checkbox"/> Manager	Name:		
<input type="checkbox"/> Member	Address:	68 MAIN STREET		<input type="checkbox"/> Member	Address:		
<input type="checkbox"/> Authorized Person		APARTMENT 218		<input type="checkbox"/> Authorized			
		BRATTLEBORO, VT 05301		<input type="checkbox"/> Other			
<input type="checkbox"/> Other		<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 Person				<input type="checkbox"/> Authorized			
				<input type="checkbox"/> Other			
<input type="checkbox"/> Other		<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 Person				<input type="checkbox"/> Authorized			
				<input type="checkbox"/> Other			
<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.

Terrell T. Walton  
Signature of an authorized person

TERRELL T. WALTON  
Typed or printed name of signer

STATE OF VERMONT  
OFFICE OF SECRETARY OF STATE

Certificate of Good Standing

I, James C. Condos, Vermont Secretary of State, do hereby certify that according to the records of this office

VERMONT TERRA L.L.C.

a Domestic Limited Liability Company formed under the laws of the State of VERMONT, was filed for record in this office on Sep 20, 2004.

I further certify that the company has perpetual duration, that its most recent annual report is on file, and that as of this date, articles of dissolution / withdrawal have not been filed.

October 26, 2020

Given under my hand and seal of office, at Montpelier, the State Capital.



*James C. Condos*

James C. Condos  
Vermont Secretary of State

2020  
10  
26  
3:12

Business ID: 0015631  
Certificate Number: 2013756132001