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Certified Copies	Certificates	of Status
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COVER LETTER

TO: Registration Section Division of Corporations

MACH 4 LLC

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:

P. Connor Curtis		
	Name of Person	
MACH 4 LLC		
······	Firm/Company	
82 Plantation Pointe Rd #218		
	Address	
Fairhope, AL 36532		
С	ity/State and Zip Code	
connor.curtis@koalainsulation.com	Tity/State and Zip Code	
E-mail address: (to be	\sim used for future annual report notification) \sim	
er information concerning this matter, please ca		
Connor Curtis	251 517-4122	
Name of Contact Person	Area Code Daytime Telephone Number 4.	
Mailing Address:	Street Address:	
Registration Section	Registration Section	
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee	
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810	
	Tallahassee, FL 32303	
Enclosed is a check for the following amount:		
Please make check payable to: FLORIDA DEP		
□ \$125.00 Filing Fee	e	

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 HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

L. MACH 4 LLC.

fname unavailable, enter alternate	name adopted for the purpose of transacting business in Flu	orida. The alternate name must include "Limited Liability Con	mpany," "UUC," or "L	
Alabama		85-3695888 3.		
(Jurisdiction under the law of which foreign limited liability company is organized)		3(FEI number, if applicable)		
	(Date first transacted business in Florids, if prior to r (See sections 605 0904 & 605.0905, F.S. to determin	egistration) ne penalty hability)		
82 Plantation Pointe R		6. <u>(Mailing Address)</u>		
Fairhope, AL 36532		Fairhope, AL 36532		
			292	
Name and street addres	<u>ss</u> of Florida registered agent: (P.O. Box	<u>NOT</u> acceptable)	- AUG 26	
Name:	Christine Curtis		PH	
Office Address:	225 N Pace St			
	Pensacola	32505 , 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.

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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]:

Title or Capacity:	Name and Address:	Title or Capacity:	1	Name and Address:
∎Manager	Name:	□Manager	Name:	
□Member	Address: 82 Plantation Pointe Rd	□Member	Address:	
Authorized	Fairhope, AL 36532	□Authorized		
Person		Person		
□Other	Other	Other		□Other
□Manager	Name:	□Manager	Name:	
□Member	Address:	Member	Address:	
Authorized		Authorized		
Person		Person	<u> </u>	
Other	Other	Other		□Other
				\sim
□Manager	Name:	□Manager	Name:	_
Member	Address:	□Member	Address:	
□Authorized		□Authorized		. 5 3
Person		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 60, 0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State completives a third degree felony as provided for in s.817.155, F.S.

P. h		•	m 3.017.
1	Signatu	re of an authorized person	
P. Connor Curtis			

John H. Merrill Secretary of State

P.O. Box 5616 Montgomery, AL 36103-5616

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State of Alabama

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

 the entity records on file in this office disclose that MACH 4 LLC was formed in Baldwin County, Alabama on October 28, 2020. The Alabama Entity
Identification number for this entity is 796-086. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.

> In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

08/24/2021

Date

20210824000008556

. H. Menill

John H. Merrill

Secretary of State



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 5, 2021

P CONNOR CURTIS 82 PLANTATION POINTE RD #218 FAIRHOPE, AL 36532 US

SUBJECT: MACH 4 LLC Ref. Number: W21000109370

We have received your document for MACH 4 LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

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.

Sharon D Franklin Regulatory Specialist II

Letter Number: 421A00018557

RECEIVED

AUG 2 6 2021

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