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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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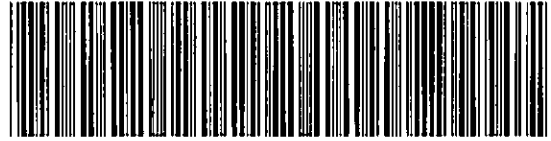
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MBH Enterprises, LLC
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:

Michelle Booth
Name of Person

MBH Enterprises, LLC
Firm/Company

235 W Brandon Blvd Ste 293
Address

Brandon, FL 33510
City/State and Zip Code

accounting@123esnow.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michelle Booth at (813) 817-2386
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

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FILED

**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. MBH Enterprises, LLC
(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. Virginia 3. 81-4541502
(Jurisdiction under the law of which foreign limited liability company is organized) (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. 235 W Brandon Blvd Ste 293 6. 235 W Brandon Blvd
(Street Address of Principal Office) (Mailing Address)

Brandon, FL 33511 STE 293
Brandon FL 33511

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

Name: Michelle Booth

Office Address: 235 W Brandon Blvd Ste 293

Brandon, Florida 33511
(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.

Michelle Booth
(Registered agent's signature)

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CLERK OF CIRCUIT COURT
FLORIDA

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: <u>Fredrick Michael Hess</u>	<input type="checkbox"/> Manager	Name: <u>Michelle Booth</u>
<input type="checkbox"/> Member	Address: <u>12220 Chattanooga</u>	<input type="checkbox"/> Member	Address: <u>1604 Stone Dr</u>
<input type="checkbox"/> Authorized	<u>Plaza, Ste 289</u>	<input checked="" type="checkbox"/> Authorized	<u>Brandon, FL 33510</u>
Person	<u>Midlothian VA 23112</u>	Person	
<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	_____	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<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	_____	<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.

Michelle Booth

Signature of an authorized person

Michelle Booth

Typed or printed name of signer

Commonwealth of Virginia



State Corporation Commission

CERTIFICATE OF FACT

I Certify the Following from the Records of the Commission:

That MBH Enterprises, LLC is duly organized as a Limited Liability Company under the law of the Commonwealth of Virginia;

That the Limited Liability Company was formed on November 28, 2016; and

That the Limited Liability Company is in existence in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date:

October 13, 2021

A handwritten signature in cursive script, appearing to read "Bernard J. Logan".

Bernard J. Logan, Clerk of the Commission

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STATE CORPORATION COMMISSION
CLERK

COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

AT RICHMOND, NOVEMBER 28, 2016

The State Corporation Commission has found the accompanying articles submitted on behalf of
MBH Enterprises, LLC

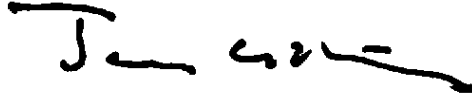
to comply with the requirements of law, and confirms payment of all required fees. Therefore, it
is ORDERED that this

CERTIFICATE OF ORGANIZATION

be issued and admitted to record with the articles of organization in the Office of the Clerk of the
Commission, effective November 28, 2016.

STATE CORPORATION COMMISSION

By

A handwritten signature in black ink, appearing to read 'J. C. Dimitri', written over a horizontal line.

James C. Dimitri
Commissioner

Limited Liability Company - Statement of Change of Registered Office and/or Registered Agent

Entity Information

Entity Name: MBH Enterprises, LLC Entity Type: Limited Liability Company
Entity ID: S6497673 Formation Date: 11/28/2016
Status: Active

Previous Registered Agent Information

RA Type: Individual Locality: CHESTERFIELD COUNTY
RA Qualification: Member or Manager of the
Limited Liability Company
Name: FREDRICK MICHAEL
HESS
The company's initial registered office address, including the street and number, if any, which is identical to the
business office of the initial registered agent, is:
12220 CHATTANOOGA
Registered Office PLAZA, SUITE 289,
Address: MIDLOTHIAN, VA, 23112 -
0000, USA

Registered Agent Information

RA Type: Individual Locality: CHESTERFIELD COUNTY
RA Qualification: Member or Manager of the
Limited Liability Company
Name: Donna Lorianne Sears
The company's initial registered office address, including the street and number, if any, which is identical to the
business office of the initial registered agent, is:
12220 Chattanooga Plz Ste
Registered Office 289, Midlothian, VA, 23112 -
Address: 4865, USA

Signature Information

Date Signed: 05/07/2020

Executed in the name of the limited liability company by:

The person signing this statement affirms that after the foregoing change or changes are made, the company will be in
compliance with the requirements of § 13.1-1015 of the Code of Virginia, as the case may be.

Printed Name

Signature

Title

Fredrick Michael Hess

Fredrick Michael Hess

President