

M22000018205

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

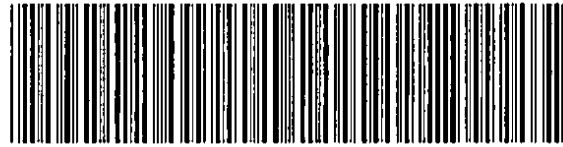
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FILED

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DEC 08 2022

< Brumby

CT CORP
3458 Lakeshore Drive, Tallahassee, FL 32312
850-656-4724

Date: 12/07/2022

Acc#I20160000072

Eric DW

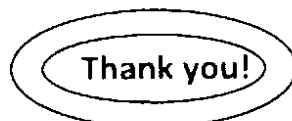
Name:	TIP NATIONAL, LLC
Document #:	
Order #:	14664102

Certified Copy of Arts & Amend:	<input type="checkbox"/>	1-2 FILING Cancellation 1st - Qualification 2nd	
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Ref# _____

Amount: \$ 155.00



TIP NATIONAL, LLC
1300 Highway A1A
Suite 101
Satellite Beach, Florida 32937

December 7, 2022

Via Hand Delivery

Florida Department of State
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Re: Consent of Release of Name to TIP National, LLC (Delaware)

Dear Sir or Madam:

TIP National, LLC, a Florida limited liability company with Doc ID L21000041809 (the "Company"), has filed, simultaneously with the submission of this letter, Articles of Dissolution (the "Articles") with the Florida Department of State on December 7, 2022.

The Company has no intention of revoking the Articles or the Company's voluntary dissolution, therefor releasing the name for use to another entity. The Company hereby consents to TIP National, LLC, a Delaware limited liability company, using the name "TIP National, LLC" when registering with the Florida Department of State and, to that end, such application for TIP Delaware to transact business within the State of Florida has been filed simultaneously with the submission of this letter.

If you have any questions, please contact the undersigned at (321) 426-7620 or jackie.devries@tipnational.com.

By: 
FILED BY: Doc 7, 2022 11:04:15

Name: Jacalyn DeVries
Title: Manager

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. TIP National, 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. Delaware 47-2347342
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. January 21, 2021
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0901 & 605.0905, F.S. to determine penalty liability)

5. 1300 Highway A1A 6. 1300 Highway A1A
(Street Address of Principal Office) (Mailing Address)
Suite, 101 Suite, 101
Satellite Beach, FL 32937 Satellite Beach, FL 32937

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

Name: C T Corporation System
Office Address: 1200 South Pine Island Road
Plantation, Florida 33324
(City) (Zip code)

APPROVED
AND
FILED
2022 DEC - 7 AM 11:16
CLERK OF DISTRICT COURT
NINTH JUDICIAL CIRCUIT
IN AND FOR FLORIDA

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.

C T Corporation System
By: Theresa Buck, Assistant Secretary
(Registered agent's signature)

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>
<input checked="" type="checkbox"/> Manager	Name: <u>Mark Tuchmann</u>
<input type="checkbox"/> Member	Address: <u>1300 Highway A1A</u>
<input type="checkbox"/> Authorized	<u>Suite 101</u>
Person	<u>Satellite Beach, FL 32937</u>
<input type="checkbox"/> Other	<input type="checkbox"/> Other

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other ☐ Other _____

<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input checked="" type="checkbox"/> Manager	Name: Robert G. Lull
<input type="checkbox"/> Member	Address: 1300 Highway A1A
<input type="checkbox"/> Authorized	Suite 101
Person	Satellite Beach, FL 32937
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____
Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ 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 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

Mark Tuchmann

Typed or printed name of signer

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "TIP NATIONAL, 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-EIGHTH DAY OF NOVEMBER, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN
PAID TO DATE.


Jeffrey W. Bullock, Secretary of State

5639196 8300

SR# 20224107511

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 204942226

Date: 11-28-22