

M23000000619

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

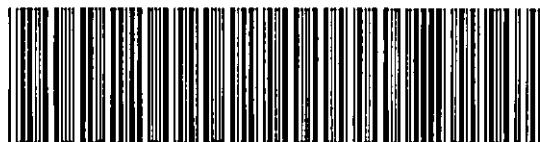
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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2023 JAN 13 PM 5:50

T. LEMIEUX
JAN 18 2023

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132961

☆Pedcor Companies

October 10, 2022


Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear Members of the Florida Department of State:

Please accept the enclosed documents delivered to your offices October 11, 2022 relating to the filing of Pensacola-SI, LLC as a foreign entity in the State of Florida.

I hope the enclosed gives sufficient information in order to complete the filing. Please do not hesitate to call me at (317) 208-3758 or email me at tbuchanan@pedcor.net if you would like to discuss further or have any questions. Thank you.

Sincerely,

A handwritten signature in black ink, appearing to read "Troy Buchanan", with a stylized flourish at the end.

Troy Buchanan

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Pensacola-SI, 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:

Troy Buchanan

Name of Person

Pedcor Companies

Firm/Company

770 3rd Avenue SW

Address

Carmel, Indiana 46032

City/State and Zip Code

margy@usindustriesgroupinc.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Troy Buchanan

317

587-0320

Name of Contact Person

at ()

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 20, 2022

TROY BUCHANAN
770 3 AVE SW
CARMEL, IN 46032

SUBJECT: PENSACOLA-SI, LLC
Ref. Number: W22000132961

We have received your document for PENSACOLA-SI, 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):

The principal address must be a street address.,

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.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 022A00023578

RECEIVED

JAN 13 2023

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. Pensacola-SI, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "L.L.C.")

(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 "L.L.C.")

2. Indiana 92-0458401
(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. 10999 Stahl Road, Suite B 10999 Stahl Road, Suite B
(Street Address of Principal Office) (Mailing Address)

Newburgh, Indiana 47630 Newburgh, Indiana 47630

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

Name: Corporation Service Company
Office Address: 1201 Hays Street
Tallahassee, Florida 32301
(City) (Zip code)

2023 JAN 13 PM 5:50

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.

Andrea S. Mancari
(Registered agent's signature) Andrea Mancari, Asst. Secretary

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:**

☒ Manager Name: Margaret S. Hungate

☐ Member Address: P.O. Box 629

☐ Authorized Evansville, IN 47704

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

Title or Capacity: **Name and Address:**

☒ Manager Name: William P. Schnakenburg

☐ Member Address: P.O. Box 629

☐ Authorized Evansville, IN 47704

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ 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

Margaret S. Hungate

Typed or printed name of signee

State of Indiana
Office of the Secretary of State

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

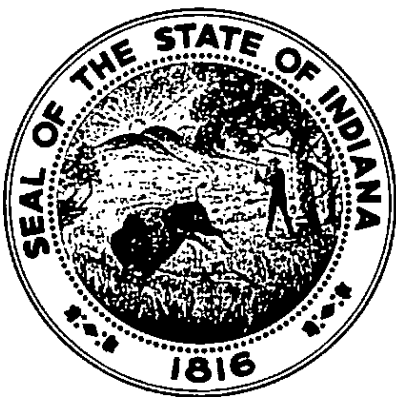
I, DIEGO MORALES, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

PENSACOLA-SI, LLC

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on September 22, 2022, and was in existence or authorized to transact business in the State of Indiana on January 09, 2023.

I further certify this Domestic Limited Liability Company has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution, or expiration has been filed or taken place. All fees, taxes, interest, and penalties owed to Indiana by the domestic or foreign entity and collected by the Secretary of State have been paid.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, January 09, 2023

Diego Morales

DIEGO MORALES
SECRETARY OF STATE

202209221625512 / 20232957265

All certificates should be validated here: <https://bsd.sos.in.gov/ValidateCertificate>

Expires on February 08, 2023.