

MA23000005881

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

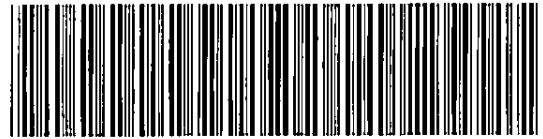
(Business Entity Name)

(Document Number)

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

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2023 APR 27 PM 11:00

SEC. OF STATE  
TALLAHASSEE, FL

YK  
5/6/23

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: MAP FL, 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:

Karen M. Boens

Name of Person

MAP FL, LLC

Firm/Company

1999 Richmond Road, Suite 300

Address

Lexington, KY 40502

City/State and Zip Code

kboens@team-map.com

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

2023 APR 27 PM 4:00  
SECRETARY OF STATE  
TALLAHASSEE, FL

FILED

For further information concerning this matter, please call:

Karen M. Boens

859

509-6399

at ( )

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



**MAP FL, LLC**  
*1999 Richmond Road, Suite 300*  
*Lexington, Kentucky 40502*  
*Phone: 859.335.8361; Fax: 859.335.0110*

April 19, 2023

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Via UPS Next Day Air

Re: Application by Foreign Limited Liability Company to transact business in Florida  
MAP FL, LLC

Dear Sir or Madam:

Enclosed please find the completed Application referenced above, together with the required Certificate of Existence from the Commonwealth of Kentucky as well as a check in the amount of \$130 to cover the costs of filing of the Application and providing us with a Certificate of Status.

If you have any questions or need additional information, please do not hesitate to contact me by mail at the office shown above, by phone at 859-509-6399 or by email at [kboens@tcommap.com](mailto:kboens@tcommap.com).

Thank you for your attention to this matter.

Very truly yours,

MAP FL, LLC

BY: Karen M. Boens  
KAREN M. BOENS  
REGISTERED AGENT

**FILED**  
2023 APR 27 PM 4:00  
SECRETARY OF STATE  
TALLAHASSEE, FL

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

MAP North Florida, 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. Kentucky 3. 92-3587918  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. Estimated June 1, 2023  
(Date first transacted business in Florida, if prior to registration)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 1999 Richmond Road 6. Same  
(Street Address of Principal Office) (Mailing Address)

Suite 300

Lexington, KY 40502

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

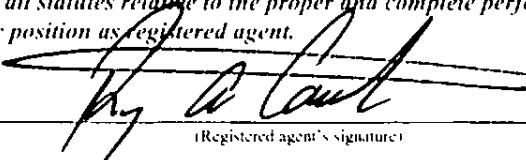
Name: Roy A. Carter

Office Address: 1232 W US Highway 90

Lake City 32055  
(City) , Florida (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)

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: Rick G. Avare  
☐ Member                      Address: 1999 Richmond Road  
☐ Authorized                      Suite 300  
Person                      Lexington, KY 40502  
☒ Other Voting Trustee                      ☐ Other

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

☐ Manager                      Name: Matthew G. Agosto  
☐ Member                      Address: 1999 Richmond Road  
☐ Authorized                      Suite 100  
Person                      Lexington, KY 40502  
☐ Other Executive Manager                      ☐ Other

☐ Manager                      Name: Roy A. Carter  
☐ Member                      Address: 1232 W. Highway 90  
☐ Authorized                      Lake City, FL 32055  
Person  
☒ Other General Manager                      ☐ Other

☐ Manager                      Name:  
☐ Member                      Address:  
☐ Authorized  
Person  
☐ 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

Karen M. Boens, Agent

\_\_\_\_\_  
Typed or printed name of signee

**Commonwealth of Kentucky**  
**Michael G. Adams, Secretary of State**

Michael G. Adams  
Secretary of State  
P. O. Box 718  
Frankfort, KY 40602-0718  
(502) 564-3490  
<http://www.sos.ky.gov>

**Certificate of Existence**

Authentication number: 289679

Visit <https://web.sos.ky.gov/fts/certvalidate.aspx> to authenticate this certificate.

I, Michael G. Adams, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

**MAP FL, LLC**

is a limited liability company duly organized and existing under KRS Chapter 14A and KRS Chapter 275, whose date of organization is April 17, 2023 and whose period of duration is perpetual.

I further certify that all fees and penalties owed to the Secretary of State have been paid; that articles of dissolution have not been filed; and that the most recent annual report required by KRS 14A.6-010 has been delivered to the Secretary of State.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal at Frankfort, Kentucky, this 19<sup>th</sup> day of April, 2023, in the 231<sup>st</sup> year of the Commonwealth.



*Michael G. Adams*

Michael G. Adams  
Secretary of State  
Commonwealth of Kentucky  
289679/1275429