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2023 MAY 10 PM 5:36

T. LEMIEUX

MAY 24 2023

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: PARK'S RENTAL & SALES, 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:

MARY JO STUDER-CWIK

Name of Person

EBERHART CAPITAL, LLC

Firm/Company

410 17TH ST., SUITE 1380

Address

DENVER, CO 80202

City/State and Zip Code

MSTUDERCWIK@EBERHARTCAPITAL.COM

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

For further information concerning this matter, please call:

Mary Jo Studer-Cwik 480 426-8710 or 720-838-6058

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

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. PARK'S RENTAL & SALES, 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. WYOMING 3. _____
(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. 410 17TH STREET, SUITE 1380 6. 410 17TH STREET, SUITE 1380
(Street Address of Principal Office) (Mailing Address)
DENVER, CO 80202 DENVER, CO 80202

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

Name: InCorp Services, Inc.
Office Address: 17888 67TH COURT NORTH
LOXAHATCHEE Florida 33470
(City) (Zip code)

2023 MAR 10 PM 5:36

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.

Heather Glenn Heather Glenn on behalf of InCorp Services, Inc.
(Registered agent's signature)

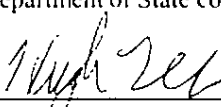
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

<u>Title or Capacity:</u>		<u>Name and Address:</u>		<u>Title or Capacity:</u>		<u>Name and Address:</u>	
<input checked="" type="checkbox"/> Manager	Name:	DAN EBERHART		<input type="checkbox"/> Manager	Name:	HUGH LEHR	
<input type="checkbox"/> Member	Address:	4501 TAMiami TRAIL N		<input type="checkbox"/> Member	Address:	410 17TH STREET, 1380	
<input type="checkbox"/> Authorized		SUITE 102		<input checked="" type="checkbox"/> Authorized		DENVER, CO 80202	
Person		NAPLES, FL 34103		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.



Signature of an authorized person

HUGH LEHR

Typed or printed name of signer

STATE OF WYOMING
Office of the Secretary of State

I, CHUCK GRAY, Secretary of State of the State of Wyoming, do hereby certify that according to the records of this office,

PARK'S RENTAL & SALES, LLC

is a
Limited Liability Company

formed or qualified under the laws of Wyoming did on **November 17, 2022**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2022-001185674**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 5th day of May, 2023 at 4:07 PM. This certificate is assigned ID Number 060668423.




Secretary of State

**AFFIDAVIT OF KIRBY PARK & MARK LYDA
SHAREHOLDERS AND DIRECTORS
OF
PARK'S RENTAL & SALES, INC.**

STATE OF FLORIDA
COUNTY OF St. Lucie

BEFORE ME, the undersigned authority, a Notary Public, duly commissioned and qualified in accordance with Florida law, personally came and appeared Kirby Park and Mark Lyda who, having first been duly sworn, states as follows:

We are the directors and the only shareholders of Park's Rental & Sales, Inc., a Florida corporation.

On behalf of Park's Rental & Sales, Inc., we hereby provide permission for the use of a name very similar to or indistinguishable from our company name, and hereby release the name "Park's Rental & Sales," for use in Florida to: Park's Rental & Sales, LLC, a Wyoming limited liability company.

We understand this will allow Park's Rental & Sales, LLC to use their name, which is very similar to PARK'S RENTAL & SALES, INC.'s name, in the state of Florida, and allow (i) Park's Rental & Sales, LLC to change its legal name to PARK'S RENTAL & SALES, LLC, and/or (ii) to file a Fictitious Business Name (DBA) with the Florida Secretary of State, Division of Corporations.

Kirby A. Park
(signature of Affiant)

Mark A. Lyda
(signature of Affiant)

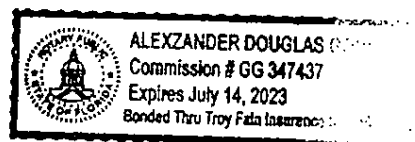
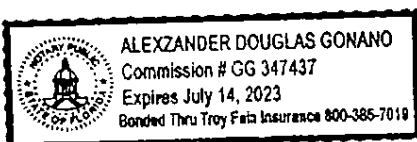
SWORN TO AND SUBSCRIBED before me on this 4 day of May, 2023. by physical presence.

[Signature]

(Notary Public)

Signatories personally known to me.

My Commission Expires: _____





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Detail by Entity Name

Florida Profit Corporation

PARK'S RENTAL & SALES, INC.

Filing Information

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Event Date Filed	12/17/1997
Event Effective Date	01/01/1998

Principal Address

% KIRBY A. PARK
2306 OKEECHOBEE ROAD
FT. PIERCE, FL 34950 65

Changed: 02/28/2011

Mailing Address

% KIRBY A. PARK
2306 OKEECHOBEE ROAD
FT. PIERCE, FL 34950-6553

Changed: 02/28/2011

Registered Agent Name & Address

PARK, KIRBY A.
2306 OKEECHOBEE ROAD
FT. PIERCE, FL 34950

Address Changed: 04/02/2013

Officer/Director Detail

Name & Address

Title P

PARK, KIRBY A.