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(Address)

(City/State/Zip/Phone #)

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STATE OF FLORIDA
TALLAHASSEE, FL

2023 SEP 15 AM 10:38

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COVER LETTER

**TO: Registration Section
Division of Corporations**

Matco 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:

Kathleen Nieberding Temprine

Name of Person

Matco LLC

Firm Company

140 Island Way #262

Address

Clearwater Beach FL 33767

City/State and Zip Code

kathleen@advancedgreenhomesolutions.com

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

For further information concerning this matter, please call:

Kathleen Nieberding Temprine

410 212-1051

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

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

Matco FL 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 3. 46-5612021
(Jurisdiction under the law of which foreign limited liability company is organized) (FBI number, if applicable)

4. None
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability.)

5. 140 Island Way #262 6. 140 Island Way #262
(Street Address of Principal Office) (Mailing Address)
Clearwater Beach FL 33767 Clearwater Beach FL 33767

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

Name: Kathleen Nieberding Temprine
Office Address: 711 Bay Esplanade
Clearwater Beach, Florida 33767
(City) (Zip code)

FILED
2023 SEP 15 AM 10:38
SECRETARY OF STATE
TALLAHASSEE, FL

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.

Kathleen Nieberding Temprine
(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: Kathleen Nieberding Temprine

☒ Member Address: 711 Bay Esplanade

☐ Authorized Clearwater Beach FL 33767

Person

☐ Other ☐ Other

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

☐ Manager Name: Matthew J Temprine

☒ Member Address: 711 Bay Esplanade

☐ Authorized Clearwater Beach FL 33767

Person

☐ Other ☐ Other

☐ Manager Name:

☐ Member Address:

☐ Authorized

Person

☐ Other ☐ Other

☐ Manager Name:

☐ Member Address:

☐ Authorized

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

Kathleen Nieberding Temprine

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 "MATCO 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 FOURTH DAY OF SEPTEMBER, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MATCO LLC" WAS FORMED ON THE FOURTH DAY OF JUNE, A.D. 2008.

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

A handwritten signature of Jeffrey W. Bullock in black ink, written over a horizontal line.

Jeffrey W. Bullock, Secretary of State

4556707 8300

SR# 20233410735

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

Authentication: 204089465

Date: 09-04-23

Florida

DRIVER LICENSE

IDENTIFICATION NUMBER: T516-514-65-801-0



TEMPERINE
KATH-LEEN NIEBERDING
4711 BAY ESPLANADE
CLEARWATER BEACH, FL 33767-1409

DOB: 08/21/1965 SEX: F
EXP: 08/21/2031 HEIGHT: 5'-09"
EYES: B HAIR: NONE

CLASS: DRIVER
EXPIRATION: 08/19/2023
ISSUANCE: 08/19/182

ENDORSEMENTS



Don't drink and drive. If you are under the influence of alcohol or drugs, it is illegal to drive. A blood alcohol test is required to be taken.