M23000015370

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



300419128303

11/17/23--01036--011 **125.00

023 NOV 17 PH 3: 27

COVER LETTER

то:	Registration Section Division of Corporations	
SUBJE	Enviro USA, I.LC	
30096		of Limited Liability Company
		ompany for Authorization to Transact Business in Florida," Certificate of ferenced foreign limited liability company to transact business in Florida.
Please	return all correspondence concerning this matter to	the following:
	Madeline Owen	
		Name of Person
	Amundsen Davis, LLC	
		Firm/Company
	111 E. Kilbourn Ave., Suite 1400	
		Address
	Milwaukee, WI 53202	
	Cit	y/State and Zip Code
	mowen@amundsendavislaw.com	
	E-mail address: (to be u	used for future annual report notification)
For fur	ther information concerning this matter, please call:	
	Madeline Owen	414 225-1737 at ()
	Name of Contact Person	at () Area Code Daytime Telephone Number
	Mailing Address:	Street Address:
Registration Section		Registration Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	The Centre of Tallahassee
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
	Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPA \$\Bigsir \text{S125.00 Filing Fee} \text{S130.00 Filing Fee} \text{Certificate of}	& 🗆 \$155.00 Filing Fee & 🗆 \$160.00 Filing Fee, Certificate

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:

tame dia variable, enter alternate il	name adopted for the purpose of transacting business in Fl	orida. The alte	mate name must include "Limited Liabil	lity Company," "L.L.C," or "
Delaware		3	(FEI number,	
(Jurisdiction under the law of w)	hich foreign limited hability company is organized)		(FEI number,	if applicable)
N/A				
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determi	registration.) ine penalty liab	ility)	
2725 Kirby Circle NE,	Bldg 2-A	27	25 Kirby Circle NE, Bldg 2	-A
reet Address of Principal Office)		0	(Mailing Address)	
Palm Bay, FL 32905		Pa	ılm Bay, FL 32905	
	<u> </u>			
Nama and street address	ss of Florida registered agent: (P.O. Box	NOT acc	ontable)	
ivanic and street addres	s of Florida registered agent. (1:0. box	NOT acc	срате	2 [
	InCorp Services, Inc.			2023 NOV 17
Name:				Y 04
				:` -
Office Address:	3458 Lakeshore Drive			7

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.

Wendy Hefley on behalf of InCorp Services, Inc.

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to

Title or Capacity:	Name and Address:	Title or Capacity:	•
■Manager	Name: American Vision Manufacturing, LLC	□Manager	Name: American Vision Manufacturing, L1
□Member	Address: 8 The Green, Suite A	■Member	Address: 8 The Green, Suite A
□Authorized	Dover, DE 19901	□Authorized	Dover, DE 19901
Person		Person	
□Other	Other	□Other	Other
∐Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
□Other	Other	□Other	□Other
⊡Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
Other	Other	□Other	Other

- 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.

DocuSigned by:		
keith Eismann		
E49E7314BA344EG		
	Signature of an authorized person	

Keith Eismann, as Manager of American Vision Manufacturing, LLC, the Manager of Enviro USA, LLC

Page 1



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "ENVIRO USA, 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 THIRTIETH DAY OF OCTOBER, A.D. 2023.

THE PARTY OF THE P

Authentication: 204482419

Date: 10-30-23