

M23000015999

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

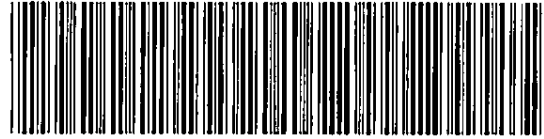
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer.

W2300015123

Office Use Only



800418156738

10/30/23--01031--009 **160.00



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 6, 2023

SHEILA GOLDEN
9 SOUTH FORREST AVENUE #100
JEFFERSONVILLE, PA 19403 US

SUBJECT: LCR EMBEDDED SYSTEMS, LLC
Ref. Number: W23000151123

We have received your document for LCR EMBEDDED SYSTEMS, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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.

Andrea Andrews
Regulatory Specialist II

Letter Number: 923A00025795

RECEIVED

DEC 07 2023

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: LCR Embedded Systems, 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:

Sheila Golden

Name of Person

LCR Embedded Systems, LLC

Firm/Company

9 South Forrest Avenue #100

Address

Jeffersonville, PA 19403

City/State and Zip Code

sgolden@lcrembedded.com

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

For further information concerning this matter, please call:

Sheila Golden

484

636-3211

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

Pennsylvania Department of State
Bureau of Corporations and Charitable Organizations
PO Box 8722 | Harrisburg, PA 17105-8722
T: 717-787-1057
dos.pa.gov/BusinessCharities

Regarding: LCR EMBEDDED SYSTEMS, LLC
Request Type: Subsistence Certificate **Issuance Date:** October 27, 2023
Request No.: 024480529 **File No.:** 0004228427
Receipt No.: 000744979
Filing Type: Domestic Limited Liability Company
Filing Subtype: Limited Liability Company
Initial Filing Date: November 19, 2013
Status: Active

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT

LCR EMBEDDED SYSTEMS, LLC

is currently subsisting on the records of the Department of State as of the issuance date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have
hereunto set my hand and caused the seal
of my office to be affixed, the day and year
above written

A handwritten signature in black ink, appearing to read "Albert Schmidt".

Albert Schmidt
Secretary of the Commonwealth



EMBEDDED
SYSTEMS

9 South Forrest Avenue #100, Jeffersonville, PA 19403
P (610)278-0840, f (610)278-0935

October 27, 2023

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: FEIN 46-4051058

Application for Registration as a Foreign LLC to transact business in Florida.

To Whom it May Concern,

Attached please find,

- application as a foreign LLC, registered in the state of Pennsylvania for authorization to do transact business in the state of Florida.
- Our check for \$160.00 for filing fee, certificate status and Certified copy.
- State of Pennsylvania Certificate of Existence

If there is any other information you need to process this application, please let me know.

Sincerely,

A handwritten signature in black ink, appearing to read "Sheila Golden", written over a horizontal line.

Sheila Golden

Controller

Office: (610) 278 - 0840 x(208)

Direct: (484) 636-3211

Cell: (610) 945-5541

Fax: (610) 278 - 0935

E-mail: sgolden@lcrembedded.com

Web: www.lcrembeddedsystems.com

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. LCR Embedded Systems, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," 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," "LLC," or "LLC.")

2. Pennsylvania 46-4051058
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 10/25/2023
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. LCR Embedded Systems, LLC 6. LCR Embedded Systems, LLC
(Street Address of Principal Office) (Mailing Address)
12605 Challenger Pkwy Suite 130 9 South Forrest Avenue #100
Orlando, FL 32826 Jeffersonville, PA 19403

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

Name: DAWIEL GALLAGHER

Office Address: 12605 CHALLENGER PKWY SUITE 130

ORLANDO, Florida 32826
(City) (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: Jason Cianciarulo

☐ Member Address: CEO

☒ Authorized 250 Commerce Suite 100

Person Irvine, CA 92602

☐ Other ☐ Other

☒ Manager Name: John Judo

☐ Member Address: VP Finance

☒ Authorized 250 Commerce Suite 100

Person Irvine, CA 92602

☐ Other ☐ Other

☒ Manager Name: Jean Misorski

☐ Member Address: CFO

☒ Authorized 12605 Challenger Pkwy Ste130

Person Orlando, FL 32826

☐ Other ☐ Other

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

☒ Manager Name: Laura Nueschafer

☐ Member Address: CAO

☒ Authorized 250 Commerce Suite 100

Person Irvine, CA 92602

☐ Other ☐ Other

☒ Manager Name: Sheila Golden

☐ Member Address: Controller

☒ Authorized 9 South Forrest Ave. #100

Person Jeffersonville, PA 19403

☐ Other ☐ Other

☒ Manager Name: Daniel Gallagher

☐ Member Address: VP Operations & Engineering

☒ Authorized 12605 Challenger Pkwy Ste130


Person Orlando, FL 32826

☐ 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

Sheila Golden

Typed or printed name of signer

Pennsylvania Department of State
Bureau of Corporations and Charitable Organizations
PO Box 8722 | Harrisburg, PA 17105-8722
T: 717-787-1057
dos.pa.gov/BusinessCharities

Regarding: LCR EMBEDDED SYSTEMS, LLC
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IN TESTIMONY WHEREOF, I have
hereunto set my hand and caused the seal
of my office to be affixed, the day and year
above written

Albert Schmidt
Secretary of the Commonwealth

Verify this certificate online at www.file.dos.pa.gov