

M24000005612

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

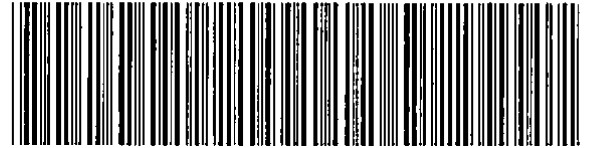
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W24-60530

Office Use Only



000427686630

2024 APR 16 AM 8:50

RECEIVED
MAY 03 2024
K. Brumbley

2024 APR 16 PM 3:17

MAY 03 2024

K. Brumbley



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 30, 2024

CSC **2nd print**

RESUBMIT

Please give original
submission date as file date.

SUBJECT: THE TREEHOUSE GUYS, LLC
Ref. Number: W24000060530

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

The second page of the application was not included.,

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.

KYLE D BRUMBLEY
Regulatory Specialist II Supervisor

Letter Number: 124A00008301

RECEIVED
2024 MAY -2 PM 3:21
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



CSC - Tallahassee
1201 Hays Street
Tallahassee, FL 32301-2607
850-558-1500, Ext:

To: Department Of State, Division Of Corporations
From: Amanda Miller
Ext:
Date: 04/16/24
Order #: 1486028-1
Re: The Treehouse Guys, LLC
Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Authority

Amount to be deducted from our State Account: \$125.00 - FL State Account Number:
I20000000195

AUTH

A handwritten signature in black ink, appearing to read "Amanda Miller", is written over the word "AUTH".

Please take the following action:

File in your office on basis
Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: The Treehouse Guys, 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:

James B. Roth

Name of Person

The Treehouse Guys, LLC

Firm/Company

PO Box 15

Address

Warren, VT 05674

City/State and Zip Code

info@thetreehouseguys.com

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

For further information concerning this matter, please call:

James B. Roth

802

793-8880

Name of Contact Person

at (_____) _____

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. The Treehouse Guys, 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. Vermont
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 45-2179072
(FEI number, if applicable)

4. January 6, 2024
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 124 Vickery Hill RoadWarren, VT 05674
(Street Address of Principal Office)

6. PO Box 15Warren, VT 05674
(Mailing Address)

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

Name: Corporation Service Company

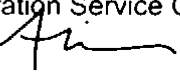
Office Address: 1201 Hays Street

Tallahassee 32301
(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.

Corporation Service Company

By: 
(Registered agent's signature)

2024 APR 16 AM 8:50

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:

James B. Roth

☐ Manager

Name: _____

124 Vickery Hill Road, Warren, VT 05674

☒ Member

Address: _____

☐ Authorized

Person _____

☐ Other _____

☐ Other _____

Title or Capacity:

Name and Address:

Christopher J. Haake

☐ Manager

Name: _____

124 Vickery Hill Road, Warren, VT 05674

☒ 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 _____

☐ 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.

James B. Roth 15 APR '24
Signature of an authorized person

James B. Roth

Typed or printed name of signer

CSC OUAL-32392

STATE OF VERMONT
OFFICE OF SECRETARY OF STATE

Certificate of Good Standing

I, Sarah Copeland Hanzas, Vermont Secretary of State, do hereby certify that according to the records of this office

THE TREEHOUSE GUYS, LLC

a Domestic Limited Liability Company formed under the laws of the State of VERMONT, was filed for record in this office on Mar 29, 2011.

I further certify that the company has perpetual duration, that its most recent annual report is on file, and that as of this date, articles of dissolution / withdrawal have not been filed.

April 15, 2024

Given under my hand and seal of office, at Montpelier, the State Capital.



Sarah Copeland Hanzas
Vermont Secretary of State

Business ID: 0035388
Certificate Number: 2014235880001