

M24000006130

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

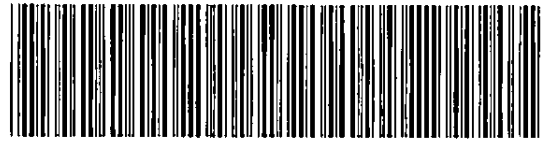
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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05/15/24--01003--011 **125.00

2024 MAY 14 10:05

MAY 15 2024

K. Brumbley



Bring it.

1201 E. 12th Ave, North Kansas City, MO. 64116

5/7/24

Florida Department of State
Division of Corporation
PO Box 6327
Tallahassee FL 32314

RE: Wagner Industries, LLC

To whom it may concern:

Wagner Industries, LLC (L23000423557) has no intention of refiling as domestic in Florida and we surrender the name to Wagner Industries, LLC foreign (DE).

Wagner Industries, LLC was accidentally set up as domestic LLC in Florida and should have been set up as foreign LLC in Florida.

Sincerely yours,

Jeff Gallentine, CFO

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Wagner Industries, 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:

Josh Rieken

Name of Person

Wagner Industries, LLC

Firm/Company

1201 E 12th Ave

Address

North Kansas City, MO 64116

City/State and Zip Code

controller@wagnerlogistics.com

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

For further information concerning this matter, please call:

Josh Rieken

573
at ()

821-1086

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. Wagner Industries, 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. DE
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 44-0595244
(FEI number, if applicable)

4. 11-23-2021
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S., to determine penalty liability)

5. Wagner Industries, LLC
(Street Address of Principal Office)

6. Wagner Industries, LLC
(Mailing Address)

8015 Westside Industrial Dr.

1201 E 12th Ave

Jacksonville, FL 32219

North Kansas City, MO 64116

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

Name: Capitol Corporate Services, Inc

Office Address: 515 East Park Avenue, 2nd Floor

Tallahassee, Florida 32301
(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.

Amanda Contreras Amanda Contreras, Asst. Secretary on
(Registered agent's signature) behalf of Capitol Corporate Services, Inc.

2024 NOV 14 AM 11:05

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: Brian Smith

☐ Member Address: 1201 E 12th Ave

☒ Authorized North Kansas City, MO 64116

Person _____

☐ Other _____ ☐ Other _____

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

☐ Manager Name: Jeffrey Gallentine

☐ Member Address: 1201 E 12th Ave

☒ Authorized North Kansas City, MO 64116

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: Justin Eck

☐ Member Address: 1201 E 12th Ave

☒ Authorized North Kansas City, MO 64116

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: Joe Johnson

☐ Member Address: 1201 E 12th Ave

☒ Authorized North Kansas City, MO 64116

Person _____

☐ Other _____ ☐ Other _____

☒ Manager Name: Wagner Logistics Holdings, LLC

☒ Member Address: 1201 E 12th Ave

☐ Authorized North Kansas City, MO 64116

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.

Jeffrey W. Gallentine, CFO
Signature of an authorized person

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 "WAGNER INDUSTRIES, 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 APRIL, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "WAGNER INDUSTRIES, LLC" WAS FORMED ON THE TWENTY-THIRD DAY OF NOVEMBER, A.D. 2021.



6418162 8300

SR# 20241754144

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

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 203368176

Date: 04-30-24