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Foreign Limited Liability Company Fikes Wholesale, LLC

Certificate of Status	1
Certified Copy	1
Page Count	06
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S. PRATHER

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COVER LETTER

	Fikes Wholesale, LLC				
UBJEC1	r:				
	Nan	ne of Limited Liability Company			
		Company for Authorization to Transact Business in Florida," Certifica referenced foreign limited liability company to transact business in Florida.			
ease retu	rn all correspondence concerning this matter	to the following:			
	Olivia Hughes				
		Name of Person			
	Casey's				
		Firm/Company			
	One SE Convenience Blvd.				
	One of convenience byva.	Address			
		Adoress			
	Ankeny, Iowa 50021				
	C	City/State and Zip Code			
	olivia.hughes@caseys.com				
	E-mail address: (to be	c used for future annual report notification)			
r further	information concerning this matter, please ca	II:			
Sc	cott Faber	515 963-3802 at ()			
	Name of Contact Person	Area Code Daytime Telephone Number			
Mailing Address:		Street Address:			
Registration Section		Registration Section			
Division of Corporations		Division of Corporations The Centre of Tallahassee			
P.O. Box 6327 Tallahassee, FL 32314					
1 6	ananassee, 11, 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
Ple	closed is a check for the following amount: ease make check payable to: FLORIDA DEP \$125.00 Filing Fee	e & 🖸 \$155.00 Filing Fee & 🗏 \$160.00 Filing Fee, Certificate			

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

Fikes Wholesale, LLC (Name of Foreign	n Limited Liability Company; must include "Limited	Liability Company," "L.L.C.," or "L.L.C.")			
			-		
	name adopted for the purpose of transacting business in Flo	rida. The alternate name must include "Lumited Liability Company,	""ILLC," or "LI.C.		
cxas		74-1857841 3			
(Jurisdiction mider the law of	which foreign limited liability company is organized)	(FEI number, if applicable)	•		
November 1, 2024			-		
<u></u>	(Date first transacted business in Florida, if prior to re (See sections 605,0904 & 605,0905, F.S. to determine	e penalty liability)	• •		
6261 Central Pointe P	arkway	6261 Central Pointe Parkway			
t Address of Principal Office)		6. (Mailing Address)			
Temple, Texas 76502		Temple, Texas 76502			
		 ·			
√ame and <u>street addre</u> Name:	ss of Florida registered agent: (P.O. Box United Agent Group	<u>NOT</u> acceptable)			
		NQT acceptable)			
Name:	United Agent Group	33408			
Name:	United Agent Group 801 U.S. Highway 1				
Name: Office Address: sistered agent's accepting been named as reignated in this applications omply with the provisi	United Agent Group 801 U.S. Highway 1 North Palm Beach (City) stance: rgistered agent and to accept service of praction, I hereby accept the appointment as a	33408	lty. I further d		

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:	Title or Capacity:	Name and Address:
□Manager	Name: Casey's Marketing Company	□Manager	Name: Eric Larsen
≅Member	Address: One SE Convenience Blvd.	□Member	Address: One SE Convenience Blvd.
□Authorized	Ankeny, lowa 50021	□Authorized	Ankeny, Iowa 50021
Person		Person	
□Other		Treasurer	Other
□Manager	Name:	∐Manager	Scott Faber
□Member	Address: One SE Convenience Blvd.	□Mcmber	Address: One SE Convenience Blvd.
□Authorized	Ankeny, Iowa 50021	□Authorized	Ankeny, Iowa 50021
Person		Person	
President	□Other	Secretary Secretary	□Other
□Manager	Brian Johnson Name:	□Manager	Doug Beech
□Member	Address: One SE Convenience Blvd.		Address: One SE Convenience Blvd.
□Authorized	Ankeny, Iowa 50021	□Authorized	Ankeny, Iowa 50021
Person		Person	
Vice-Presid	ent Other	■Other	Other
indexed individuals a 9. Attached is a certi- jurisdiction under the of the translator musi- 10. This document is	executed in accordance with section 605.02	Florida Department of State A , duly authenticated by the date is in a foreign language, a 03 (1) (b), Florida Statutes, I	Annual Report form. Official having custody of records in the a translation of the certificate under oath-
submitted in a docum	ent to the Department of State constitutes a t	hird degree felony as provid	ed for in s.817.155, F.S.
	Signature	of an authorized person	
	Scott Faber, Secretary		

Typed or printed name of signee

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Jane Nelson Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Conversion for FIKES WHOLESALE, LLC (file number 805760912), a Domestic Limited Liability Company (LLC), was filed in this office on October 25, 2024.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on November 08, 2024.



Phone: (512) 463-5555

Prepared by: SOS-WEB

gave Halson

Jane Nelson Secretary of State

Fax: (512) 463-5709 TID: 10264

Dial: 7-1-1 for Relay Services Document: 1422075200002