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(Requestor's Name)

\_\_\_\_\_  
(Address)

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(Address)

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(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

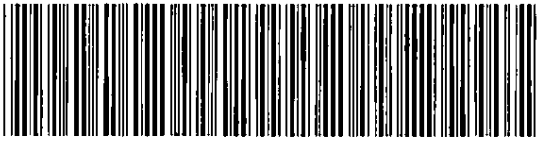
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer.

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2024 OCT 25 PM 4:46

W. Scott Parr  
Attorney & Counselor at Law  
87 Oak Street  
Wareham, MA 02571  
(603) 860-2116  
[scott.parr@wsparr.com](mailto:scott.parr@wsparr.com)

October 19, 2024

Florida Department of State  
Registration Section  
PO Box 6327  
Tallahassee, FL 32314

RE: Registration of Foreign LLC  
DuraBull, LLC

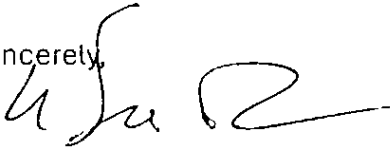
Dear Sir or Madam:

Please find enclosed an application by foreign limited liability company for authorization to transact business in Florida on behalf of DuraBull, LLC, a Massachusetts limited liability company.

Also enclosed are a current Certificate of Organization from the Secretary of the Commonwealth of Massachusetts, and a check in the amount of \$125.

Please reach me at (603) 860-2116 or [scott.parr@wsparr.com](mailto:scott.parr@wsparr.com) if I can provide any additional information. Thank you.

Sincerely,



W. Scott Parr

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: DuraBull, 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:

W. Scott Parr  
Name of Person  
Firm/Company  
87 Oak St.  
Address  
Wareham, MA 02571  
City/State and Zip Code  
Scott.parr@wsparr.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Scott Parr at (603) 860-2116  
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. DuraBull, 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. Massachusetts
(Jurisdiction under the law of which foreign limited liability company is organized)
3. (FEI number, if applicable)

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

5. 64A Crawford Rd
(Street Address of Principal Office)
Rutland, MA 01543
6. 64A Crawford Rd
(Mailing Address)
Rutland, MA 01543

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

Name: Christopher Butler
Office Address: 2100 South Ocean Dr., Unit 15D
Fort Lauderdale, Florida 33316
(City) (Zip code)

2014 OCT 25 11:16:46

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.

Christopher Butler
(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: Mathew Butler  
 Member                      Address: 64A Crawford Rd  
 Authorized                      Rutland, MA 01543  
 Person  
 Other                       Other

Title or Capacity:                      Name and Address:  
 Manager                      Name: Nicholas Butler  
 Member                      Address: 64A Crawford Rd  
 Authorized                      Rutland, MA 01543  
 Person  
 Other                       Other

Manager                      Name: Christopher Butler  
 Member                      Address: 64A Crawford Rd  
 Authorized                      Rutland, MA 01543  
 Person  
 Other                       Other

Manager                      Name: \_\_\_\_\_  
 Member                      Address: \_\_\_\_\_  
 Authorized                      \_\_\_\_\_  
 Person  
 Other                       Other

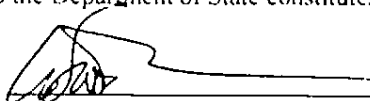
Manager                      Name: \_\_\_\_\_  
 Member                      Address: \_\_\_\_\_  
 Authorized                      \_\_\_\_\_  
 Person  
 Other                       Other

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.

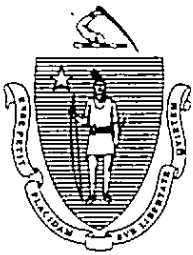
9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must 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.

  
 \_\_\_\_\_  
 Signature of an authorized person

W. Scott Parr

\_\_\_\_\_  
 Typed or printed name of signee



*The Commonwealth of Massachusetts*  
*Secretary of the Commonwealth*  
*State House, Boston, Massachusetts 02133*

William Francis Galvin  
Secretary of the  
Commonwealth

October 2, 2024

TO WHOM IT MAY CONCERN:

I hereby certify that a certificate of organization of a Limited Liability Company was filed in this office by

**DURABULL, LLC**

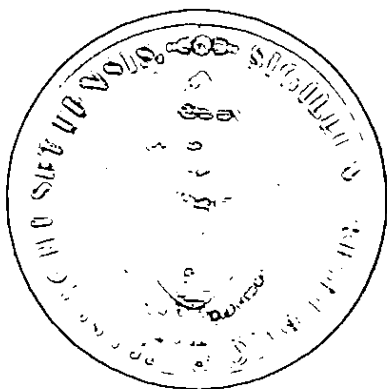
in accordance with the provisions of Massachusetts General Laws Chapter 156C on **May 27, 2022.**

I further certify that said Limited Liability Company has filed all annual reports due and paid all fees with respect to such reports; that said Limited Liability Company has not filed a certificate of cancellation; that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156C, § 70 for said Limited Liability Company's dissolution; and that said Limited Liability Company is in good standing with this office.

I also certify that the names of all managers listed in the most recent filing are:  
**NICHOLAS R BUTLER, MATHEW C BUTLER**

I further certify, the names of all persons authorized to execute documents filed with this office and listed in the most recent filing are: **NICHOLAS R BUTLER, MATHEW C BUTLER, CHRISTOPHER BUTLER, WILLIAM SCOTT PARR**

The names of all persons authorized to act with respect to real property listed in the most recent filing are: **CHRISTOPHER BUTLER**



In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth