M25000002115

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2025 JAN 30 AM 11:03

CREATIVE PLANNING
LEGAL, P.A.

January 22, 2025

Registration Section
Division of Corporations
PO Box 6327
Tallahassee FL 32314

**Re: Application by Foreign LLC – Creative Planning Business Alliance LLC**

Dear Sir/Madam:

Please find the following items for Creative Planning Business Alliance LLC, a Kansas limited liability company (the ***"Company"***), enclosed for filing.

1. Application by Foreign LLC for Authorization to Transact Business in Florida
2. Certificate of Good Standing, as issued to the Company by the Kansas Secretary of State on Jan. 15, 2025
3. A check in the amount of $125.00 to cover the filing fees related to the processing of the Company's application

Please acknowledge receipt of this filing by date stamping and returning this cover letter and/or the Company's approved filing in the provided pre-paid envelope. **This cover letter is provided for reference by the Registration Section and is not part of the filing submitted on behalf of the Company.**

If you have any questions, please do not hesitate to contact me.

Sincerely,

Mary Sabatini, Paralegal
On Behalf of Attorney Seamus P. Smith
Direct: 913-356-9198
mary.sabatini@creativeplanning.com

SPS/ms
Enclosures

**COVER LETTER**

TO: **Registration Section**
**Division of Corporations**

SUBJECT: CREATIVE PLANNING BUSINESS ALLIANCE 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:

MARY SABATINI
Name of Person

CREATIVE PLANNING LEGAL, P.A.
Firm/Company

5454 W 110TH ST
Address

OVERLAND PARK KS 66211-1204
City/State and Zip Code

BUSINESSNOTICES@CREATIVEPLANNING.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARY SABATINI at (913) 356-9198
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. CREATIVE PLANNING BUSINESS ALLIANCE 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. KANSAS
(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. 5454 W 110TH ST
OVERLAND PARK KS 66211-1204
(Street Address of Principal Office)

6. 5454 W 110TH ST
OVERLAND PARK KS 66211-1204
(Mailing Address)

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

Name: UNIVERSAL REGISTERED AGENTS, INC.

Office Address: 1317 CALIFORNIA ST

TALLAHASSEE, Florida 32304
(City) (Zip code)

2020 JAN 30 PM 4:03

**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.***

Ashton Villegas
(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: | Title or Capacity: | Name and Address: |
|---|---|---|---|
| ■Manager | Name: PETER MALLOUK | ☐Manager | Name: SEAMUS P. SMITH |
| ☐Member | Address: 5454 W 110TH ST | ☐Member | Address: 5454 W 110TH ST |
| ☐Authorized | OVERLAND PARK KS 66211-1204 | ■Authorized | OVERLAND PARK KS 66211-1204 |
| Person | | Person | |
| ☐Other_____ | ☐Other_____ | ☐Other_____ | ☐Other_____ |
| ☐Manager | Name: | ☐Manager | Name: |
| ☐Member | Address: | ☐Member | Address: |
| ☐Authorized | | ☐Authorized | |
| Person | | Person | |
| ☐Other_____ | ☐Other_____ | ☐Other_____ | ☐Other_____ |
| ☐Manager | Name: | ☐Manager | Name: |
| ☐Member | Address: | ☐Member | Address: |
| ☐Authorized | | ☐Authorized | |
| Person | | Person | |
| ☐Other_____ | ☐Other_____ | ☐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

SEAMUS P. SMITH

Typed or printed name of signee

# STATE OF KANSAS

## OFFICE OF SECRETARY OF STATE

## CERTIFICATE OF GOOD STANDING

I, SCOTT SCHWAB, Kansas Secretary of State, certify that the records of this office reveal the following:

Business ID: 8183253

Business Name: CREATIVE PLANNING BUSINESS ALLIANCE LLC

Type: Domestic Limited Liability Company

Jurisdiction: Kansas

was filed in this office on May 01, 2023, and is in good standing, having fully complied with all requirements of this office.

No information is available from this office regarding the financial condition, business activity or practices of this entity.

In testimony whereof:
I affix my official certification seal.
Done at the City of Topeka,
on this day January 15, 2025.

Scott Schwab

SCOTT SCHWAB
KANSAS SECRETARY OF STATE

Certification Number: 906581-20250115 To verify the validity of this certificate please visit https://www.sos.ks.gov/eforms/BusinessEntity/CertifiedValidationSearch.aspx and enter certificate number.