

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

Mrs 000007227

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.
Account Number : 120010000062
Phone : (323)962-8600
Fax Number : (323)389-0502

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

Foreign Limited Liability Company

Landis Custom Cabinetry & Woodworking LLC

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$155.00

2025 MAY 17 AM 12:51

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2025 MAY 16 PM 4:42

DIVISION OF CORPORATIONS
FLORIDA

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Corporate Filing Menu

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Landis Custom Cabinetry & Woodworking 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:

Erik Treutlein

Name of Person

Legalzoom.com, Inc.

Firm/Company

11501 Domain Dr, STE 200

Address

Austin, TX 78758

City/State and Zip Code

info@landiscustomcabinets.com

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

For further information concerning this matter, please call:

Erik Treutlein

800

773-0888

at (_____) _____

Name of Contact Person

Area Code

Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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 605.002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Landis Custom Cabinetry & Woodworking 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. PENNSYLVANIA 3. 45-4127752
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0004 & 605.0002, F.S. to determine penalty liability.)

5. 4071 South Salem Church Rd. 6. 4071 South Salem Church Rd.
(Street Address of Principal Office) (Mailing Address)
Dover, PA 17315 Dover, PA 17315

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

Name: UNITED STATES CORPORATION AGENTS, INC.

Office Address: 476 Riverside Ave.

Jacksonville, Florida 32202
(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.

Erik Treutlein

(Registered agent's signature)

ERIK TREUTLEIN, ASSISTANT SECRETARY, UNITED STATES CORPORATION AGENTS, INC.

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JACKSONVILLE, FL
CLERK OF STATE

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]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
☐ Manager	Name: <u>Michael A. Landis</u>	☐ Manager	Name: _____
☒ Member	Address: <u>4071 South Salem Church Rd.</u>	☐ Member	Address: _____
☐ Authorized	<u>Dover, PA 17315</u>	☐ Authorized	_____
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.

/S/ Michael A. Landis

Signature of an authorized person

Michael A. Landis

Typed or printed name of signer

Pennsylvania Department of State
Bureau of Corporations and Charitable Organizations
PO Box 8722 | Harrisburg, PA 17105-8722
T: 717-787-1057
dos.pa.gov/BusinessCharities

Regarding: Landis Custom Cabinetry & Woodworking LLC
Request Type: Subsistence Certificate **Issuance Date:** May 16, 2025
Request No.: 056761121 **File No.:** 0004073922
Receipt No.: 001691135
Filing Type: Domestic Limited Liability Company
Filing Subtype: Limited Liability Company
Initial Filing Date: December 16, 2011
Status: Active

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT

Landis Custom Cabinetry & Woodworking LLC

is currently subsisting on the records of the Department of State as of the issuance date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the seal of my office to be affixed, the day and year above written

Albert Schmidt
Secretary of the Commonwealth

Verify this certificate online at www.file.dos.pa.gov