TO: Qualification/Tax Lien section

Division of Corporations

TO: Qualification/Tax Lien Section Division of Corporations	
SUBJECT: STECZCO LI	Name of corporation - must include suffix)
Dear Sir or Madam:	_
The enclosed "Application by Foreign Cor "Certificate of Existence", and check are to transact business in Florida.	rporation for Authorization to Transact Business in Florida", submitted to register the above referenced foreign corporation
Please return all correspondence concer	ning this matter to the following:
	(Name of Person)  LCC (Firm/Company)  VAI Dos +A (Address)  A  3/602 (City/State/Zip)
Should you need to call someone concern	- ·
(Name of Person)	at (912) 247-6440 (Area Code & Daytime Telephone Number)
STREET ADDRESS:  Qualification/Tax Lien Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399	ODDOPR7493005/14/9901005006  *******5.00 ******5.00  MAILING ADDRESS:  ODDOPR7493006/23/9901078001  Qualification/Tax Lien Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314
1100	.1// FF# 395.00



Secretary of State

May 17, 1999

AMY STECZ 3312 N VALDOSTA RD VALDOSTA, GA 31602

SUBJECT: STECZCO LLC Ref. Number: W99000011466

We have received your document for STECZCO LLC and check(s) totaling \$5.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$280.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

We are enclosing the proper form(s) with instructions for your convenience.

The fees to qualify a foreign limited liability company total \$285.00 and breakdown as follows: \$250.00 filing fee for the application and affidavit and \$35 registered agent designation fee. An additional \$52.50 is due for each certified copy requested and an additional \$8.75 is due for each certificate of status requested.

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

A photocopy of the certificate of existence is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6043.

Shawn Logan Document Specialist

Letter Number: 499A00027144



# FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

June 23, 1999

AMY STECZ 3312 N VALDOSTA RD VALDOSTA, GA 31602

SUBJECT: STECZCO LLC Ref. Number: W99000011466

We have received your document for STECZCO LLC and your check(s) totaling \$285.00. However, the document has not been filed and is being retained in this office for the following:

A photocopy of the certificate of existence is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6043.

Shawn Logan Document Specialist

Letter Number: 899A00033497

SECRETARY OF STARE

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. STECZCO, (Name of foreign limited liability company so contained in the name at present.)	y must end with the	words "limited company" or their abl	breviation "L.C." if not
2. Seorgia (Jurisdiction under the law of which foreig company is organized)	n limited liability	$\frac{58 - 246142}{\text{(FEI number, if ap)}}$	) ( pplicable)
Date of Organization)	5	(Duration: Year limited liability c exist or "perpetual")	company will cease to
	- 99 ess in Florida. (See s	ections 608.501, 608.502, and 817.1	55, F.S.)
Date first transacted busing.  5728 N Davis 1  Pensacola Fc  List name, title, and business address	Hwy		
Pensacola Fi			
mine marrie, acres, arres occusiones acreations	lity company in F	lorida: (attach additional page i	riMGKIWno
List name, title, and business address will manage the foreign limited liabil  NAME & ADDRESS:	lity company in F	lorida: (attach additional page i	riMGKIWno
will manage the foreign limited liabil  NAME & ADDRESS:	lity company in F	lorida: (attach additional page i	r[MGK]who if necessary) TITLE:
NAME & ADDRESS:  Amy M STECZ	lity company in F  TITLE:  MGRM	lorida: (attach additional page i	r[MGK]who if necessary) TITLE:
will manage the foreign limited liabil  NAME & ADDRESS:	lity company in F  TITLE:  MGEM  RI	lorida: (attach additional page i	rimgkjwno if necessary)  TITLE:
will manage the foreign limited liabil  NAME & ADDRESS:  Amy M STECZ  3312 N VALUOSIA	lity company in F  TITLE:  MGEM  RI	lorida: (attach additional page i	rimgkjwno if necessary)  TITLE:
will manage the foreign limited liabil  NAME & ADDRESS:  Amy M STECZ  3312 N VALUOS/A	lity company in F  TITLE:  MGEM  RI	lorida: (attach additional page i	r[MGK]who if necessary)  TITLE:  99 JUL 13 AM SECRETARY OF TALL AHASSEE, F
will manage the foreign limited liabil  NAME & ADDRESS:  Amy M STECZ  3312 N VAIDOSTA  VAIDOSTA GA 316	lity company in F  TITLE:  MELM  RU  OU)	lorida: (attach additional page i	rimgkjwno if necessary)  TITLE:
will manage the foreign limited liabil  NAME & ADDRESS:  Amy M STECZ  3312 N VALVOSTA  VALDOSTA GA 316  DAREN R STECZ	lity company in F  TITLE:  MGRM  OOJ  MGRM	lorida: (attach additional page i	FILED  FILED  SECRETARY OF STALLAHASSEE, FLORE
will manage the foreign limited liabil  NAME & ADDRESS:  Amy M STECZ  3312 N VAIDOSTA  VAIDOSTA GA 316	lity company in F  TITLE:  MERM  OU)  MERM  RI  MERM	lorida: (attach additional page i	FILED  FILED  FILED  SHORETARY OF STALLAHASSEE, FLORE

9. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the Secretary of State or the proper official having custody of records in the state under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

# AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

The undersigned member or authorized representative of a member of	.o,	LLC	
certifies:			
		-	
1) the above named limited liability company has at least one member;			
2) the total amount of cash contributed by the member(s) is	\$	100	
3) if any, the agreed value of property other than cash contributed by member(s) is (A description of the property is attached and made a part hereto.)	\$		;
and 4) the total amount of cash and property contributed and anticipated to be contributed by member(s) is  (This total amount of cash and property contributed and anticipated to be contributed.)	\$	100	'
(This total includes amounts from 2 and 3 above.)			
any M Stea			
Signature of a member or an authorized representative of a mem (In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)	iber.		
Amy $M$ , $S_{TECZ}$ Typed or printed name of signee	<del></del>		
Typed or printed name of signee		, 66	
	AHA Action	Ë	77
	SSE	$\overline{\omega}$	=
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Filing Fee: \$250.00 for Application and Affidavit		ŏ	

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability	Company is:			
STECZCO,	LLC			
2. The name and the Florida street address of the registered agent and office are:				
Susan	Tosser (Name)			
<u> 3030 S</u>	t address (P.O. Box NOT	ACCEPTABLE)		
PENSACOLA	FL City/State/Zip	32503		

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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

SECKILIANY OF SI (Signature)

Filing Fee: \$ 35 for Designation of Registered Agent

### **Secretary of State**

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 CONTROL NUMBER: K915180
EFFECTIVE DATE: 04/12/1999
COUNTY : LOWNDES
REFERENCE : 0007
PRINT DATE : 04/12/1999

FORM NUMBER : 356

AMY M. STECZ 3312 N. VALDOSTA ROAD VALDOSTA, GA 31602

#### CERTIFICATE OF ORGANIZATION

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

### STECZCO, LLC A GEORGIA LIMITED LIABILITY COMPANY

has been duly organized under the laws of the State of Georgia on the effective date stated above by the filing of articles of organization in the Office of the Secretary of State and by the paying of fees as provided by Title 14 of the Official Code of Georgia Annotated.

WITNESS my hand and official seal in the City of Atlanta and the State of Georgia on the date set forth above.



Anly Cop

Cathy Cox Secretary of State