M04000001768

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

700030204127

05/11/04 -01002--025 **130.00

FILED
04 MAY 10 PM 4:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
04 MAY 10 AM 9:3
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 632767 5060333

AUTHORIZATION :

COST LIMIT : $ PPD

FILED
04 MAY 10 AM 9:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : May 10, 2004

ORDER TIME : 12:50 PM

ORDER NO. : 632767-005

CUSTOMER NO: 5060333

CUSTOMER: Tina Boring
Horne Properties Inc.
Suite 205
412 North Cedar Bluff Road
Knoxville, TN 37923

FOREIGN FILINGS

NAME: DOUGLAS AND ASSOCIATES, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX_____ PLAIN STAMPED COPY
XX_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 2956

EXAMINER: _____

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

FILED
04 MAY 10 AM 9:30
SECRETARY OF STATE
TALLAHASSEE, 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. DOUGLAS AND ASSOCIATES, LLC
(Name of foreign limited liability company)

2. TENNESSEE
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 62-1584397
(FEI number, if applicable)

4. 11/15/94
(Date of Organization)

5. 2025
(Duration: Year limited liability company will cease to exist or "perpetual")

6. May 7, 2004
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)

7. 412 NORTH CEDAR BLUFF ROAD, SUITE 205

KNOXVILLE, TN 37923-3609
(Street address of principal office)

8. If limited liability company is a manager-managed company, check here ☐

9. The name and usual business addresses of the managing members or managers are as follows:

DOUGLAS A. HORNE, 412 N. CEDAR BLUFF RD STE 205, KNOXVILLE, TN 37923

RICHARD C. PRESLEY, 412 N. CEDAR BLUFF RD STE 205, KNOXVILLE, TN 37923

THOMAS C. WHEELER, 412 N. CEDAR BLUFF RD STE 205, KNOXVILLE, TN 37923

CHRISTINA C. GREY, 412 N. CEDAR BLUFF RD STE 205, KNOXVILLE, TN 37923

10. Attached is an original 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. (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.)

11. Nature of business or purposes to be conducted or promoted in Florida: DEVELOP REAL ESTATE

Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

CHRISTINA C. GREY
Typed or printed name of signee

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:

DOUGLAS AND ASSOCIATES, LLC

2. The name and the Florida street address of the registered agent and office are:

Corporation Service Company
(Name)

1201 Hays Street
Florida street address (P.O. Box **NOT** ACCEPTABLE)

Tallahassee FL 32301
(City/State/Zip)

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 as provided for in Chapter 608, F.S.

Brian Courtney
Asst. V. Pres
(Signature)

$ 100.00 Filing Fee for Application
$ 25.00 Designation of Registered Agent
$ 30.00 Certified Copy (optional)
$ 5.00 Certificate of Status (optional)

Secretary of State
Division of Business Services
312 Eighth Avenue North
6th Floor, William R. Snodgrass Tower
Nashville, Tennessee 37243

ISSUANCE DATE: 05/05/2004
REQUEST NUMBER: 04126503
TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 11/15/1994
STATUS: ACTIVE
CORPORATE EXPIRATION DATE: 12/31/2025
CONTROL NUMBER: 0286326
JURISDICTION: TENNESSEE

TO:
CFS
8161 HWY 100

NASHVILLE, TN 37221

REQUESTED BY:
CFS
8161 HWY 100

NASHVILLE, TN 37221

CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT

"DOUGLAS AND ASSOCIATES, LLC"

A LIMITED LIABILITY COMPANY DULY FORMED UNDER THE LAW OF THIS STATE WITH DATE OF FORMATION AND DURATION AS GIVEN ABOVE;
THAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE EXISTENCE OF THE LIMITED LIABILITY COMPANY HAVE BEEN PAID;
THAT THE MOST RECENT LIMITED LIABILITY ANNUAL REPORT REQUIRED HAS NOT BEEN FILED
THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND
THAT ARTICLES OF TERMINATION OF THE EXISTENCE HAVE NOT BEEN FILED.

FOR: REQUEST FOR CERTIFICATE ON DATE: 05/05/04

	FEES	
RECEIVED:	$40.00	$0.00
TOTAL PAYMENT RECEIVED:		$40.00

RECEIPT NUMBER: 00003497767
ACCOUNT NUMBER: 00101230

FROM:
CFS
8161 HIGHWAY 100
#172
NASHVILLE, TN 37221-0000

Riley C Darnell

RILEY C. DARNELL
SECRETARY OF STATE