

MP00000902

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

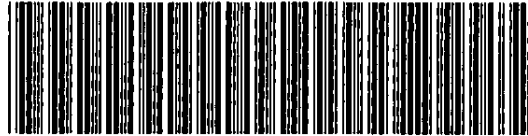
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
15 JAN 27 PM 2:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FEB 04 2015
S. YOUNG

Coleman | Talley

ATTORNEYS

VALDOSTA | ATLANTA

A Limited Liability Partnership

colemantalley.com

910 N. Patterson St.
Valdosta, GA 31601
Phone (229) 242-7562
Fax (229) 333-0885

Kimberly O. Carter, RP®, FRP

Direct (229) 671-8263
kim.carter@colemantalley.com

January 26, 2015

Florida Secretary of State
Divisions of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

VIA FEDERAL EXPRESS

Re: McCrary Holdings, LLC

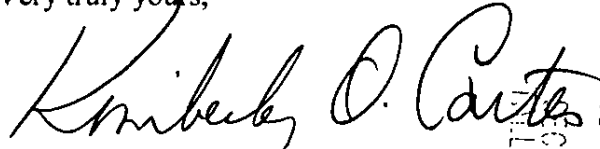
Dear Sir/Madam:

Enclosed please find the following:

1. An original and one (1) copy of *Application for Authorization to Transact Business in Florida, Certificate of Designation of Registered Agent* and accompanying *Certificate of Existence* from the Georgia Secretary of State for **McCrary Holdings, LLC**;
2. Our firm's check in the amounts of \$130.00 for the cost to file the enclosed Application; and
3. A self-addressed, pre-paid federal express mailer envelope.

If you have any questions concerning this filing, please let me know. Otherwise, if everything appears in order, please return to our office, in the enclosed self-addressed, pre-paid federal express mailer, a stamp file copy of this application and a Certificate of Status for this company. Thank you.

Very truly yours,



Kimberly O. Carter, RP®, FRP
Paralegal to A.A. Howell, IV

Enclosures

[1320875]

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

*IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A
FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. McCRARY HOLDINGS, 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. Georgia 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. January 9, 2014
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)


5. 4516 Mahan Drive
Hahira, Georgia 31632
(Street Address of Principal Office)

6. 4516 Mahan Drive
4516 Mahan Drive
(Mailing Address)

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Justin O'Neil McCrary
4516 Mahan Drive
Hahira, Georgia 31632

8. 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)


Signature of an authorized person

(In accordance with section 605.0201, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true, 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 8.17.155, F.S.)

Justin O'Neil McCrary
Typed or printed name of signee

FILED
JUN 27 PM 2:00
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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:

McCRARY HOLDINGS, LLC

If unavailable, the alternate to be used in the state of Florida is:

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

C T Corporation System

(Name)

1200 South Pine Island Road

Florida Street Address (P.O. Box NOT ACCEPTABLE)

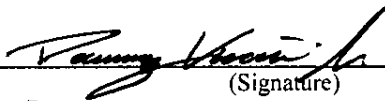
Plantation

FL 33324

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 605, Florida Statutes.

By: _____



(Signature)

Danny Verdecchia, Jr. Asst. Secretary

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

15 JAN 27 PM 2:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

STATE OF GEORGIA

Secretary of State
Corporations Division
313 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CONTROL NUMBER : 14029452
DATE INC/AUTH/FILED : March 25, 2014
JURISDICTION : Georgia
PRINT DATE : January 26, 2015

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

McCrary Holdings, LLC
A Domestic Limited Liability Company

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



B. P. Kemp
Brian P. Kemp
Secretary of State

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15 JAN 27 PM 2:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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