

MIS000010304

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

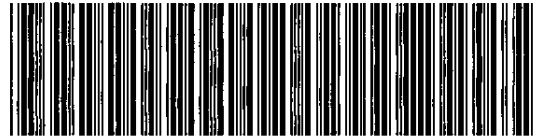
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2015 DEC 28 AM 9:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

At Outigan DEC-29 2015



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 11, 2015

JANET K. FOSHEE
110 CROSSWAY ROAD
TALLAHASSEE, FL 32305

SUBJECT: GATOR TAIL AMUSEMENT L.L.C.
Ref. Number: W15000079914.

We have received your document for GATOR TAIL AMUSEMENT L.L.C. and your check(s) totaling \$160.00. However, the document has not been filed and is being retained in this office for the following:

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

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) 245-6051.

Neysa Culligan
Regulatory Specialist II

Letter Number: 715A00025964

RECEIVED
15 DEC 28 PM 4: 10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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. Gator Tail Amusement 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. 46-5290693
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 07/01/2015
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 110 Crossway Rd
Tallahassee, FL 32305
(Street Address of Principal Office)

6. 54 Marshall Rd NE
Milledgeville, GA 31061
(Mailing Address)

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

Name: Janet K Foshee
Office Address: 110 Crossway Rd
Tallahassee, Florida 32305
(City) (Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation 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.

Janet K Foshee
(Registered agent's signature)

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

David Kenneth Foshee, Member
Janet K Foshee, Member

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)

Janet K Foshee
Signature of an authorized person

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.

Janet K Foshee, Member
Typed or printed name of signee

FILED
2015 DEC 28 AM 9:44
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

STATE OF GEORGIA

Secretary of State

Corporations Division

313 West Tower

2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

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

Gator Tail Amusement L.L.C

a Domestic Limited Liability Company

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below 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.

Docket Number	:12244838
Date Inc/Auth/Filed	:03/12/2013
Jurisdiction	: Georgia
Print Date	:12/22/2015
Form Number	:211



A handwritten signature in black ink, appearing to read "B. P. Kemp".

Brian P. Kemp
Secretary of State

STATE OF GEORGIA

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

ANNUAL REGISTRATION

Electronically Filed
Secretary of State
Filing Date: 7/14/2015 9:50:55 AM

BUSINESS INFORMATION

CONTROL NUMBER	13401110
BUSINESS NAME	Gator Tail Amusement L.L.C
BUSINESS TYPE	Domestic Limited Liability Company
EFFECTIVE DATE	03/12/2013

PRINCIPAL OFFICE ADDRESS

ADDRESS 54 Marshall Rd NE, Milledgeville, GA, 31061, USA

REGISTERED AGENT'S NAME AND ADDRESS

NAME	ADDRESS
David Foshee, K	54 Marshall Rd, Milledgeville, GA, 31061, USA

@@ HEADERTITLE INFORMATION

NAME	TITLE	ADDRESS
N/A	N/A	N/A

AUTHORIZER INFORMATION

AUTHORIZER SIGNATURE	Janet K Foshee
AUTHORIZER TITLE	Organizer



Brian P. Kemp
Secretary of State