

M190000125B

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

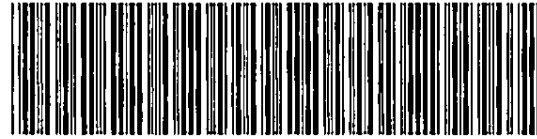
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA

2019 JAN 30 AM 11

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COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: iTrip, 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:

Randle S. Davis, Esq.  
Name of Person

---

Davis Law Group, PLLC  
Firm/Company

---

103 Wexford Hall  
Address

---

Hendersonville, TN 37075  
City/State and Zip Code

---

rdavis@davislawgrouppllc.com  
E-mail address: (to be used for future annual report notification)

2019 JAN 30 A 10:14  
FILED IN TALLAHASSEE, FLORIDA  
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For further information concerning this matter, please call:

Randle S. Davis, Esq. at (615) 822-4875  
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 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:*

1. iTrip, 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. Tennessee (Jurisdiction under the law of which foreign limited liability company is organized) 3. 47-4165907 (FEI number, if applicable)

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

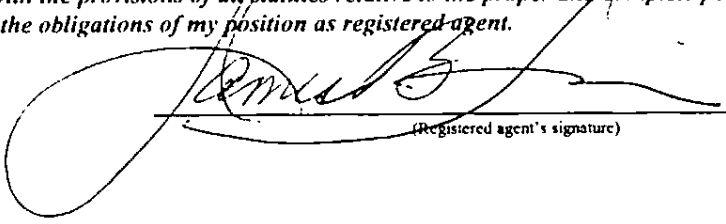
5. 205 Powell Place (Street Address of Principal Office) Suite 309 Brentwood, TN 37027  
6. 205 Powell Place (Mailing Address) Suite 309 Brentwood, TN 37027

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

Name: James Tipps  
Office Address: 10044 Linden Place Drive  
Seminole, Florida 33776  
(City) (Zip code)

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STATE OF FLORIDA  
TALLAHASSEE

**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.*

  
(Registered agent's signature)





**Tre Hargett**  
Secretary of State

**Division of Business Services**  
**Department of State**  
State of Tennessee  
312 Rosa L. Parks AVE, 6th FL  
Nashville, TN 37243-1102

**DAVIS LAW GROUP, PLLC**  
RANDLE S. DAVIS, ESQ.  
103 WEXFORD HALL  
HENDERSONVILLE, TN 37075

January 25, 2019

**Request Type: Certificate of Existence/Authorization**  
Request #: 0303675

Issuance Date: 01/25/2019  
Copies Requested: 1

**Document Receipt**

Receipt #: 004493990

Filing Fee: \$20.00

Payment-Credit Card - State Payment Center - CC #: 3748562217

\$20.00

**Regarding: iTrip, LLC**  
Filing Type: Limited Liability Company - Domestic  
Formation/Qualification Date: 06/02/2015  
Status: Active  
Duration Term: Perpetual  
Business County: WILLIAMSON COUNTY

Control #: 801975  
Date Formed: 06/02/2015  
Formation Locale: TENNESSEE  
Inactive Date:

**CERTIFICATE OF EXISTENCE**

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

**iTrip, LLC**

- \* is a Limited Liability Company duly formed under the law of this State with a date of incorporation and duration as given above;
- \* has paid all fees, interest, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;
- \* has filed the most recent annual report required with this office;
- \* has appointed a registered agent and registered office in this State;
- \* has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Tre Hargett  
Secretary of State

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