# A DI LACA MATTI ENT LA STAR LIVE STA

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H19000321467 3)))

110101 20	NOT hit the REFRESH/RELOAD button on your bro Doing so will generate another cover sheet	,	
To:	Division of Corporations Fax Number : (850)617-6383		7. 
From:	Account Name : BARKER WILLIAMS, PLLC Account Number : I20170000030 Phone : (850)308-7033 Fax Number : (850)308-7115	2	ų.
ar	the email address for this business entity to be not not not not the contract that it is to be not the contract that it is not to be not not the contract that it is not to be not the contract that is not that it is not that it is not that it is not th	e used for desse.	futu ••
ar	the email address for this business entity to be not not report mailings. Enter only one email address:  brady.paddock@gmail.com  Foreign Limited Liability Company  339 Paradise Point LLC	ess please.	futi 
ar	the email address for this business entity to be not not report mailings. Enter only one email address:  brady.paddock@gmail.com  Foreign Limited Liability Company	ess please.	futi ••
ar	the email address for this business entity to be unual report mailings. Enter only one email address:  brady.paddock@gmail.com  Foreign Limited Liability Company  339 Paradise Point LLC  Certificate of Status  Certified Copy  1	ess please.	futi —
ar	the email address for this business entity to be not not report mailings. Enter only one email address:  brady.paddock@gmail.com  Foreign Limited Liability Company  339 Paradise Point LLC  Certificate of Status  0	y	futi

### COVER LETTER

		COVER EETTER			
	gistration Section rision of Corporations				
в́јест:	339 Paradise Point LLC		·ce <sub>d</sub>		
	Nai	me of Limited Liability (	Company		
ne enclosed distence, ar	d "Application by Foreign Limited Liability nd check are submitted to register the above	Company for Authorize referenced foreign limit	ation to Transact Business ted liability company to t	s in Florida," ( ransact busine	Certificate ss in Flori
ease returr	all correspondence concerning this matter	to the following:		2019 001	
	Fairar J. Barker		<u> </u>	. <u> </u>	
		Name of Person	i. C	· · ·	1
	Barker Williams, PLLC		: :		
		Firm/Company	1	61:1	***
	60 Clayton Lane, Suite B		>	; 9	
		Address			
	Santa Rosa Beach, FL 32459				
	·	City/State and Zip Code			
	brady.paddock@gmail.com				
	E-mail address. (to	be used for future annua	report notification)		
r further i	nformation concerning this matter, please c	all.			
Fa	rrar J. Barker	850 at (	308-7033		
	Name of Contact Person	Area Code	Daytime Telephon	ne Number	
Div	AHANG ADDRESS: vision of Corporations		STREET ADDRESS: Division of Corporation	าร	
P.C	gistration Section D. Box 6327 Itahassee, FL 32314		Registration Section Clifton Building 2661 Executive Center Tallahassee, FL 32301	Circle	
	closed is a check for the following amount, ase make check payable to: FLORIDA DE \$125.00 Filing Fee \$130.00 Filing Certificate	3 Fee & 🗏 \$155.00	Filing Fee & 🔲 \$10	60.00 Filing F Status & Certi	

# 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:

sme unavailable, enter attemate m	ime adopted for the purpose of transacting business in Fl	onda. The alternate r	isme must include "Limited I	Lubility Comp	any Cir. L	C," or "I
Arkansas				<del>[</del> _ ,	13	
	nich foreign finisted liability company is organized)	3	(9EI ra	<u>:</u>	<u>`</u> ;	
(Jurisdiction under the law of w)	iich toreign Emited liability company is organized)		(551 71	moer it appil	(°) (°)	•
						;
				;		•
	(Date first transacted bissiness in Florida, it prior to (See sections 505 0904 & 605 0905, F.S. to determ	registration.)				: •
	(See sections 505 0904 & 605 0905, F.S. to determ	nine penalty liability)		<i>(</i> , `	·Ľ-	٠.
7003 Sugar Crest Driv	r	7003	Sugar Crest Drive	: "	<del>-</del>	
	Yirzipal Otitice)	6	(Minling A	<u>, , , , , , , , , , , , , , , , , , , </u>	io	
Change Salder - co	Yurrupal Office)		(Mariling A	(ddress)		
fatteet waarest of t	•					
•	•		rkana. AR 71854			
Texarkana, AR 71854	·		rkana, AR 71854			_
Texarkana, AR 71854	Stephen Drake Martin, Jr.	Texa				
Texarkana, AR 71854  Name and street addres	Stephen Drake Martin, Jr.  134 Grayton Trails Road	Texa	able)			
Texarkana, AR 71854  Name and street address  Name.	Stephen Drake Martin, Jr.	Texa				

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.

Docusigned by:		 
197E82827138481	(Registered agent's signature)	

Address.
ed Coper
* i .
Name. Address.
ed
Other
Name:
Address.
ed
Other

Typed or printed name of sumee



# Arkansas Secretary of State John Thurston

State Capitol Building • Little Rock, Arkansas 72201-1094 • 501-682-3409

of domestic and foreign corporations, do hereby certify that the records of this office show

## 339 PARADISE POINT LLC

authorized to transact business in the State of Arkansas as a Limited Liability Company, filed Articles of Organization in this office October 10, 2012.

Our records reflect that said entity, having complied with all statutory requirements in the State of Arkansas, is qualified to transact business in this State.



In Testimony Whereof, I have hereunto set my hand and affixed my official Seal. Done at my office in the City of Little Rock, this 30th day of October 2019.

John Thurston ine Centificate Authorization Code: f9d013ba0ba9733 To verny the Authorization Code, visit sos.arkansas.gov