

M2200000/507

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

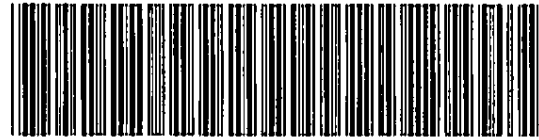
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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T. LEMIEUX
JAN 31 2022

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 4, 2021

JENNIFER COOK
1517 HUNT CLUB BLVD STE 200
GALLATIN, TN 37066

SUBJECT: STS CENTRAL FLORIDA, LLC
Ref. Number: W21000154589

We have received your document for STS CENTRAL FLORIDA, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 421A00029165

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. STS Central Florida, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

Signature Title Services

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

3. 87-3706273
(FEI number, if applicable)

4. 01/01/2022
(Date first transacted business in Florida, if prior to registration.
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 840 Co Rd 466
(Street Address of Principal Office)

6. 1517 Hunt Club Blvd Suite 200
(Mailing Address)

The Villages, FL 32159

Gallatin, TN 37066

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

Name: Eric Nelson

Office Address: 840 Co Rd 466

The Villages, Florida 32159
(City) (Zip code)

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JUN 31 PM 4:10
22

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.

[Signature]
(Registered agent's signature)
SignNow e-signature ID: 64efcc3227...
11/24/2021 17:08:37 UTC

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity: **Name and Address:**

Manager Name: Casey Brown
 Member Address: 1517 Hunt Club Blvd
 Authorized Suite 200
 Person Gallatin, TN 37066
 Other _____ Other _____

Title or Capacity: **Name and Address:**

Manager Name: Gus Grizzard
 Member Address: 840 Co Rd 466
 Authorized The Villages FL 32159
 Person _____
 Other _____ Other _____

Manager Name: Jennifer Cook
 Member Address: 1517 Hunt Club Blvd
 Authorized Suite 200
 Person Gallatin, TN 37066
 Other _____ Other _____

Manager Name: _____
 Member Address: _____
 Authorized _____
 Person _____
 Other _____ Other _____


Manager Name: Eric Nelson
 Member Address: 840 Co Rd 466
 Authorized The Villages FL 32159
 Person _____
 Other _____ Other _____

Manager Name: _____
 Member Address: _____
 Authorized _____
 Person _____
 Other _____ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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)

10. 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.


 SignNow e-signature ID: a567c86903 ..
 +1/24/2021-17-06-37 UTC

Signature of an authorized person



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

JENN COOK
SUITE 200
1517 HUNT CLUB BLVD
GALLATIN, TN 37066

January 31, 2022

Request Type: Certificate of Existence/Authorization
Request #: 0457569

Issuance Date: 01/31/2022
Copies Requested: 1

Document Receipt

Receipt #: 006885136 Filing Fee: \$20.00
Payment-Credit Card - State Payment Center - CC #: 3822691955 \$20.00

Regarding: STS Central Florida LLC
Filing Type: Limited Liability Company - Domestic Control #: 1258470
Formation/Qualification Date: 11/24/2021 Date Formed: 11/24/2021
Status: Active Formation Locale: TENNESSEE
Duration Term: Perpetual Inactive Date:
Business County: SUMNER COUNTY

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

STS Central Florida 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 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

Processed By: Cert Web User

Verification #: 051414221