# M22000002257

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SECRETARY OF STATE ALLAHASSEE! FLORIDA

## COVER LETTER

SUBJECT		Southern Heritage Real Estate Holdings Company, LLC		
SUBJECT	ne of Limited Liability Company			
The enclos Existence,	sed "Application by Foreign Limited Liability and check are submitted to register the above	Company for Authorization to Transact Business in Florida," Certificate of referenced foreign limited liability company to transact business in Florida		
Please retu	irn all correspondence concerning this matter	to the following:		
	R. Jonathan Guthrie			
		Name of Person		
	Patrick, Beard, Schulman & Jacoway.	P.C.		
537 Market Street, Suite 300		Firm/Company		
		Address		
	Chattanooga, Tennessee 37402			
		City/State and Zip Code		
	jguthrie@pbsjlaw.com			
	E-mail address: (to b	e used for future annual report notification)		
For further	information concerning this matter, please ca	dl:		
R	. Jonathan Guthrie	423 756-7117		
_	Name of Contact Person	at () Area Code Daytime Telephone Number		
R D P	Tailing Address: Degistration Section Division of Corporations O. Box 6327 Callahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street. Suite 810 Tallahassee, FL 32303		
PI	nclosed is a check for the following amount: lease make check payable to: FLORIDA DEI ] \$125.00 Filing Fee	ee &   S155.00 Filing Fee &   \$160.00 Filing Fee, Certificate		

# APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605 (0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED ILABILITY COMPANYTOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Southern Heritage Real Estate Holdings Company, must include "Limited Liability Company," "L.L.C." or "LLC.")

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

(It 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.")

1700 Summit Lake Drive, Suite 101		
N/A   (Date first transacted business in Florida, if prior to registration )   (See sections 605 0901 & 605 0905, F.S. to determine penalty liability)		
Date first transacted business in Florida, if prior to registration     (See sections 605 0901 & 605 0905, F.S. to determine penalty liability)     7137 Donald Wilson Drive	di (FE! number, if applicable)	
Date first transacted business in Florida, if prior to registration     (See sections 605 0901 & 605 0905, FS to determine penalty hability)     7137 Donald Wilson Drive		
Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Wendy R Weiner, Esq.  Value 101  Wendy R Weiner, Esq.  1700 Support Lake Drive Suite 101		
Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Wendy R Weiner, Esq.  Name:  Wendy R Weiner, Esq.  1700 Summit Lake Drive, Suite 101		
Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Wendy R Weiner, Esq.  Name:  Wendy R Weiner, Esq.  1700 Summit Lake Drive, Suite 101		
Wendy R Weiner, Esq.  Name:  1700 Summit Lake Drive, Suite 101		
Wendy R Weiner, Esq.  Name:  Wendy R Weiner, Esq.  Name:  1700 Supposit Lake Drive, Suite 101		
Wendy R Weiner, Esq.  Name:  1700 Summit Lake Drive, Suite 101		
Wendy R Weiner, Esq.  Name:  1700 Summit Lake Drive, Suite 101	<b>D</b>	
1700 Summit Lake Drive Suite 101	022	
1700 Summit Lake Drive Suite 101	2022 JAN 3	
Office Address:	3	
	<u> </u>	
Tallahassee 32317 SA N	₹	

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)

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]: Name and Address: Name and Address: Title or Capacity: Title or Capacity: Chris L. Mayberry □Manager □ Manager Name: 7137 Donald Wilson Drive Address: □Member ■ Member Fairview, Tennessee 37062-7265 □ Authorized □ Authorized Person Person □Other \_\_\_\_ □Other ... □Other\_\_\_\_ □ Other Name: \_\_\_\_\_\_ □Manager Name: \_\_\_\_\_ □Manager Address: Address: \_\_\_\_\_\_ □Member □Member □ Authorized □ Authorized Person Person □Other\_\_\_\_ □Other\_ \_ \_\_\_ Other\_\_\_\_ □Other\_\_\_\_ Name: Name: □Manager □Manager Address: Address: \_\_\_\_\_ □Member ☐ Member ☐ Authorized □ Authorized Person Person □Other\_\_\_\_ □Other\_\_\_\_ ☐Other \_\_\_\_\_\_ □Other Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed 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 \$.817.155, F.S.

Chris Mayberry
Typed or printed name of signee



# **Division of Business Services Department of State**

State of Tennessee 312 Rosa L. Parks AVE, 6th FL Nashville, TN 37243-1102

### JONATHAN GUTHRIE

SUITE 300 537 MARKET STREET CHATTANOOGA, TN 37402 November 30, 2021

Request Type: Certificate of Existence/Authorization

Issuance Date: 11/30/2021

Request #:

0447702

Copies Requested:

Document Receipt

Receipt #: 006746260

Filing Fee:

\$20.00

Payment-Credit Card - State Payment Center - CC #: 3819041936

\$20.00

Regarding:

Southern Heritage Real Estate Holdings Company, LLC

Filing Type:

Limited Liability Company - Domestic

Control #:

1256918

Formation/Qualification Date: 11/17/2021

Date Formed:

11/17/2021

Status:

Active

Formation Locale: TENNESSEE

Duration Term:

Perpetual

Inactive Date:

Business County: WILLIAMSON 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

# Southern Heritage Real Estate Holdings Company, 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.

Secretary of State

Processed By: Cert Web User

Verification #: 050161011