# M24000001907

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PICK-UP WAIT MAIL						
(Business Entity Name)						
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### **COVER LETTER**

	egistration Section ivision of Corporations							
UD IF CT	98 Hatfield, LLC							
SUBJECT	Name of Limited Liability Company							
		mpany for Authorization to Transact Business in Florida." Certificate of crenced foreign limited liability company to transact business in Florida.						
Please retu	rn all correspondence concerning this matter to th	ne following:						
	Richard G. Weller							
	Name of Person							
98 Hatfield, LLC  Firm/Company  Suite 100 3225 McLeod Drive  Address  Las Vegas NV 89121  City/State and Zip Code								
							rgweller@pacbell.net	
							E-mail address: (to be us	ed for future annual report notification)
						or further	information concerning this matter, please call:	
						F	Richard G. Weller	909 208-2451
							Name of Contact Person	Area Code Daytime Telephone Number
R D P	Iailing Address: egistration Section Division of Corporations O. Box 6327 fallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303						
Pl	nclosed is a check for the following amount: lease make check payable to: FLORIDA DEPAR I \$125.00 Filing Fee	s □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate						

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 98 Hatfield, 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.") Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 9111 Cross Park Drive 3225 McLeod Drive Las Vegas NV 89121 Knoxville TN 37923 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Registered Agents Inc Name: 7901 4th St N STE 300 Office Address: St. Petersburg 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

(Registered agent's signature)

and accept the obligations of my position as registered agent.

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:	Title or Capacity	<u>v:</u>	Name and Address:
Manager	Name: Richard G. Weller	□Manager	Name:	
□Member	Address: 160 Chisholm Trail	□Member	Address:	
□Authorized	Redlands CA 92373	□Authorized		
Person		Person		
□Other	Other	Other		□Other
Manager	Name: Kathleen A. Weller	□Manager	Name:	
□Member	Address: 160 Chisholm Trail	□Member		
□Authorized	Redlands CA 92373	□Authorized		
Person		Person		
□Other	Other	□Other		Other
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized		□Authorized		7 7
Person	<del> </del>	Person		- in
□Other	Other	Other	<del></del>	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.

Richard G. WELLER
Typed or printed name of signer



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

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

Issuance Date: 01/18/2024

Filing Fee:

Formation Locale: TENNESSEE

1499367

01/08/2024

Copies Requested:

Control #:

Date Formed:

Inactive Date:

January 18, 2024

\$20.00

\$20.00

RICHARD G. WELLER

SUITE D200, 9111 CROSS PARK DRIVE

KNOXVILLE, TN 37923

Request Type: Certificate of Existence/Authorization

Request #:

0564782

**Document Receipt** 

Receipt #: 008580685

Payment-Credit Card - State Payment Center - CC #: 3865955773

98 Hatfield, LLC

Regarding: Filing Type:

Limited Liability Company - Domestic

Formation/Qualification Date: 01/08/2024

Status:

Active Perpetual

Duration Term:

Business County: KNOX 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

#### 98 Hatfield, 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

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