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2009 OCT -7 PM 12:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Shivers OCT 08 2009

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** OLCC Tennessee, Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Shanna Hawes

Name of Person

Firm/Company

8505 West Irlo Bronson Memorial Hwy

Address

Kissimmee, FL 34747

City/State and Zip code

shawes@orangelake.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Shanna Hawes

Name of Person

at ( 407 ) 905.1904

Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☒ \$78.75 Filing Fee & Certified Cop    ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. OLCC Tennessee, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Tennessee

(State or country under the law of which it is incorporated)

3. 26-3809143

(FEI number, if applicable)

4. December 3, 2008

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. \_\_\_\_\_

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 8505 W. Irlo Bronson Mem. Highway, Kissimmee, FL 34747

(Principal office address)

8505 West Irlo Bronson Memorial Hwy, Kissimmee FL 34747

(Current mailing address)

8. Timeshare

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

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

Name: NRAI Services, Inc.

Office Address: 2731 Executive Park Drive, Suite 4

Weston

(City)

, Florida 33331

(Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation 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.

Imendolyn Andrews  
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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12. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: Don L. Harrill

Address: 8505 West Irlo Bronson Memorial Hwy

Kissimmee, FL 34747

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Don L. Harrill

Address: 8505 West Irlo Bronson Memorial Hwy

Kissimmee, FL 34747

Vice President: Brian T. Lower

Address: 8505 West Irlo Bronson Memorial Hwy

Kissimmee, FL 34747

Secretary: Brian T. Lower

Address: 8505 West Irlo Bronson Memorial Hwy, Kissimmee FL 34747

Treasurer: Tom Nelson

Address: 8505 West Irlo Bronson Memorial Hwy, Kissimmee FL 34747

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. \_\_\_\_\_

(Signature of Director or Officer listed in number 12 of the application)

14. Brian T. Lower, Executive Vice President

(Typed or printed name and capacity of person signing application)

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TALLAHASSEE FLORIDA



**STATE OF TENNESSEE**  
**Tre Hargett, Secretary of State**  
Division of Business Services  
312 Rosa L. Parks Avenue  
6th Floor, William R. Snodgrass Tower  
Nashville, TN 37243

**CAPITAL FILING SERVICE, INC.**

September 29, 2009

8161 Hwy. 100, 172  
Nashville, TN 37221 USA

**Request Type: Certificate of Existence/Authorization**  
Request #: 0000101

Issuance Date: 09/29/2009  
Copies Requested: 1

Receipt #: 569  
Filing Fee: \$20.00

**Regarding: OLCC TENNESSEE, INC.**  
Filing Type: Corporation For-Profit - Domestic  
Charter/Qualification Date: 12/03/2008  
Status: Active  
Duration Term: Perpetual

Control #: 591473  
Date Formed: 12/03/2008  
Jurisdiction: Tennessee  
Inactive Date:

**CERTIFICATE OF EXISTENCE**

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that  
**OLCC TENNESSEE, INC.**

\* is a Corporation duly incorporated under the law of this State with a date of incorporation and duration as given above;

\* has paid all fees, taxes and penalties owed to this State 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.

*Tre Hargett*

Tre Hargett, Secretary of State  
Business Services Division

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