

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED

2019 SEP 25 PM 12:14

SECRETARY OF STATE
TALLAHASSEE, FL

CR2E041 (1/14)

4. State/Country of Formation

5. Date Organized or Qualified To Do Business in Florida

3/19/2002

6. FEI Number

Applied For

7

**\$5.00 Additional Fee required
for a certificate of status**

8. Name and Address of Current Registered Agent

Name Your Capital Connection, Inc

Street Address (P.O. Box Number Is Not Acceptable) Suite

Address (P.O. Box Number Is Not Acceptable) Suite
417 E Virginia ST, STE 1

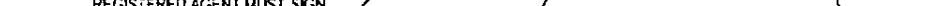
Apt #, Etc.

City Tallahassee

State	Zip Code
FL	33301

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 605, F.S.

**Signature of
Registered Agent**

the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 605, F.S.
 Seth Neely for Your Capital Connection, Inc.
Date 9/26/19
REGISTERED AGENT MUST SIGN

10. Names and Street Addresses of Authorized Representatives/Managers

Titles	Name of Authorized Representatives/ Managers	Street Address of Each Authorized Representative/ Manager	City / State / Zip
Mgr	Michael S. Bradford	407 Hearthstone Way	Woodstock, GA 30189
			19 SEP 25
			FM 1:00

11. E-mail Address Michael Bradford @ comcast.net

(To be used for future annual report notifications)

12. I certify that I am an authorized representative/ manager or the receiver or trustee empowered to execute this application as provided for in Chapter 605, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirement of section 605.0012, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that 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.

Signature of authorized representative/member

Nicholas Bergend

- Date

9/23/19

Daytime Phone # 770-666-3616