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#### TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Regions Properties, LLC		
	ited Liability Company)	
	ability Company for Authorization to Transact Busines ubmitted to register the above referenced foreign limite	
Please return all correspondence concerning this m	natter to the following:	
Cecelia Anderson		
(Na	me of Person)	
Harrison Rivard Zimmerman & Bennett, C	htd.	
(Fi	rm/Company)	
420 W Beach Drive		
	(Address)	
Denoma City El 20404		
Panama City, FL 32401	ate and Zip Code)	
(Only)	AAR JUL	
For further information concerning this matter, ple	ease call:	FILED
Cecelia Anderson	at (850 ) 769-7714	Ö
(Name of Person)	(Area Code & Daytime Telephone Number)	
STREET ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
409 E. Gaines Street	P.O. Box 6327	
Tallahassee, Florida 32399	Tallahassee, Florida 32314	
Enclosed is a check for the following amount:		
□ \$125.00 Filing Fee □ \$130.00 Filing Fee & Certificate of	☐ \$155.00 Filing Fee & ☑ \$160.00 Filing Fee, Certificate f Status Certified Copy of Status & Certified	

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Lei	Regions Properties, LLC	
i.	(Name of Foreign Limited Liability Company)	
-	Georgia  (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	
	01/16/04 5. perpetual (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	
6. 7.	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)  147 N Tyndall Parkway, Panama City, FL 32404	
	(Street Address of Principal Office)  If limited liability company is a manager-managed company, check here   The name and usual business addresses of the managing members or managers are as follower:	
•	Scott Seymour, 500 Westpark Drive, Suite 140, Peachtree City, GA 30269  Tim Baker, 500 Westpark Drive, Suite 140, Peachtree City, GA 30269	П = П
	Cathy Brooks, 500 Westpark Drive, Suite 140, Peachtree City, GA 30269	ij
thy tra	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having stody offect equivisition under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a anslation of the certificate under eath of the translator must be submitted.)  1. Nature of business or purposes to be conducted or promoted in Florida: Real Estate Development	rds
	Signature of a member or an authorized representative of a member.  (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)  Scott Seymor  Typed or printed name of signee	

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name	e of the Limited Liability Co	ompany is:	
Regions Prop	perties, LLC		
2. The name	e and the Florida street addre	ress of the registered agent and office are:	
	Scott Seymour		
		(Name)	
	107 N. 38th Street		
	Florida Street	Address (P.O. Box NOT ACCEPTABLE)	
	Mexico Beach	FL 32410 City/State/Zip	FIL 04 JUL -6 SECHLIANASS TALLAHASS
liability com agent and ag relating to th	pany at the place designated gree to act in this capacity. I ne proper and complete perfo	and to accept service of process for the above stall in this certificate, I hereby accept the appointm further agree to comply with the provisions of a furmance of my duties, and I am familiar with an agent as provided for in Chapter 608, Florida St	nent a registered all statutes de accept the

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

Secretary of State
Corporations Division
315 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CONTROL NUMBER : 0404162
DATE INC/AUTH/FILED: 01/16/2004
JURISDICTION : GEORGIA
PRINT DATE : 06/17/2004
FORM NUMBER : 211

HARRISON RIVARD ZIMMERMAN & BENNETT WILLIAM HARRISON 420 W BEACH DRIVE PANAMA CITY, FL 32401

#### CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that as of the above print date

REGIONS PROPERTIES, LLC
A GEORGIA LINITED LIABILITY COMPANY

is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated.

Said entity was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date and has not filed articles of dissolution, certificate of cancellation or any other similar document with the Office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the print date above. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This information is electronically transmitted, issued and certified in accordance with the Georgia Electronic Records and Signatures Act and Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

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Cathy Cox Secretary of State