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RECEIVED

SECRETARY OF STAIL

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: Hallnbutt & Associates, LLC - a Georgia limited liability company (Name of Limited Liability Company)		
The enclosed "Application by Foreign Limited Liability Company for Florida," Certificate of Existence, and check are submitted to register liability company to transact business in Florida		
Please return all correspondence concerning this matter to the following	ing:	
Terrell C. Madigan		
(Name of Person)		
Madigan Law Firm, P.L.		
(Firm/Company)		
Post Office Box 10321		
(Address)		
Tallahassee, FL 32302	<u>.</u>	
(City/State and Zip Code)		
For further information concerning this matter, please call:		
Terrell C. Madigan at (850)	224-8623	
(Name of Person) (Area Code &	z Daytime Telephone Number)	
MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Corporations Tallahassee, FL 32314	center Circle	
Enclosed is a check for the following amount: \$\Bigsim \frac{1}{2}\$125.00 Filing Fee \$\Bigsim \frac{1}{2}\$130.00 Filing Fee & \$\Bigsim \frac{1}{2}\$155.00 Filing Fee Certificate of Status \$\Bigsim \frac{1}{2}\$125.00 Filing Fee & \$\Bigsim \frac{1}{2}\$155.00 Filing Fee & \$\Bigsim \fr	Fee & \$\Bigsim \\$160.00\$ Filing Fee, Certificate ed Copy of Status & Certified Copy	

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	(Name of Foreign Limite	d Liability Company)	·	
Georgia		3, 20-5617132		
	w of which foreign limited liability		er, if applicable)	
September 22, 2	006	5. perpetual		
	Organization)	(Duration: Year limited exist or "perpetual")	liability company will ce	ase to .
will commence tra	nsacting business upon fili			
	(Date first transacted business in (See sections 608.501 & 608.502 F			
106 South Mock I	Road		TAE 0	<u>. </u>
Albany, GA 31705			SEF CRE CRE	
	(Street Addre	ess of Principal Office)	ASS	C.M. Marketon
If limited liability c	ompany is a manager-manage	ed company, check here	_ m⊣≺	
The 4	1 h adda a64h	-	T (6 -	
i ne name and usua	l business addresses of the ma	anaging memoers or mana	gers are as tonows:	
Dolores S. Hall and	J. Darrell Hall			
106 South Mock F	Road		·	
Albanii CA 2170				
Albany, GA 3170	<u>'5</u>			
	ertificate of existence, no more than 9			
	u of which it is organized. (Δ nhotoc		ficate is in a foreign langu	age. a
-	• • •	opy is not acceptable. If the certi-		
slation of the certificate	under oath of the translator must be su	ubmitted.)		
slation of the certificate	• • •	ubmitted.)		
nstation of the certificate of Nature of business	under oath of the translator must be su	or promoted in Florida:		
slation of the certificate of Nature of business	under oath of the translator must be so sor purposes to be conducted	or promoted in Florida:		
slation of the certificate of Nature of business of improved real p	under oath of the translator must be so sor purposes to be conducted	or promoted in Florida: orida authorized representative of F.S., the execution of this docum	Commercial real estatement of a member.	

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.

The name of the Limited Liability Company is:

Hallnbutt & Associates - a Georgia limited liability company

2.	The name and the	Florida street	address of	the registered	agent and	office are:

Terrell C. Madigan	
	(Name)
215 East Tharpe Str	eet
Florida Street A	ddress (P.O. Box NOT ACCEPTABLE)
Tallahassee	FL 32303
	City/State/Zip

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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

(Signature)

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

Control No. 0681260

STATE OF GEORGIA

Secretary of State

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

CERTIFICATE OF EXISTENCE

I, Cathy Cox, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

Hallnbutt & Associates, LLC

Domestic Limited Liability Company

was formed or was authorized to transact business on 09/22/2006 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated 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 date issued. 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 certificate is issued pursuant to 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.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 29th day of September, 2006

Cathy Cox Secretary of State

Certification Number: 316219-1 Reference:

Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp