# MU700003872

Requestor's Name) (Requestor's Name)
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
N C
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Office Use Only



000104669280

06/26/07--01029--004 \*\*125.00

ERATICAL OF STATE ISION OF CORPORATION ALLAHASSEE, FLORIDA RECEIVED

O7 JUN 26 PM 3: 41
SECRETARY OF STATE

#### **COVER LETTER**

<b>TO:</b> Registration Section Division of Corporations	
SUBJECT: Fisher Education Con (Name of Limited Liabi	
	ed Liability Company for Authorization to Transact Business in are submitted to register the above referenced foreign limited da.
Fisher Educa 555 Hicko McMinnville	is matter to the following:    Fisher     (Name of Person)     From Consulting, LLC     (Firm/Company)     Ory Blud.     (Address)     TN 37110     ty/State and Zip Code)
For further information concerning this matter,	, please call:
Thomas H. Fisher	at (931 ) 668-0775
(Name of Person)	(Area Code & Daytime Telephone Number)
MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: \$\\$125.00\$ Filing Fee [] \$130.00 Filing Fee  Certificate	e & [] \$155.00 Filing Fee & [] \$160.00 Filing Fee, e of Status Certified Copy 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.

Fisher Education Consult	ting	LLC
(Name of Foreign Limited Liability Company)	<del>لي</del>	
Tennessee	3.	36-4543018
(Jurisdiction under the law of which foreign limited liability company is organized)	_	(FEI number, if applicable)
17 Oct. 2003	5.	Perpetual Of 3
(Date of Organization)	_	(Duration:-Year limited liability company will cease to exist or "perpetual")
30 May 2007		A
(Date first transacted business in F		
(See sections 608.501 & 608.502 F.S	s. to dete	rmine penatry maonity)
555 Hickory Blud.		
meminnville, TN 37110		
(Street Address	of Princi	pal Office)
Thomas H. Fisher, Ed.D. Linda C. Fisher, Ph.D. 555 Hickory Blvd. McMinnville, TN 37110		
Attached is an original certificate of existence, no official having custody of records in the jurisdiphotocopy is not acceptable. If the certificate is in under oath of the translator must be submitted)	ction	under the law of which it is organized. (A
Nature of business or purposes to be conducted or p		
Educational con	1541	ting
Educational con Shoman H.	1.	
Signature of a member or an authoriz	JUK	hes
(In accordance with section 608.408(3), F.S., the affirmation under the penalties of perjury t	zed rep executio	resentative of a member. n of this document constitutes an
	zed rep execution hat the fa	resentative of a member. n of this document constitutes an acts stated herein are true.)

## 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	of the	Limited	Liability	Company	is:
----	----------	--------	---------	-----------	---------	-----

Fisher Education Consulting, LLC

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

Richard	Ε.	Benton
43.1		

(Name)

1415 East Piedmont Drive, Suite 4

Florida Street Address (P.O. Box NOT ACCEPTABLE)

Tallahassee, FL 32308

City/State/Zip

Pasenton

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)

Secretary of State **Division of Business Services** 312 Eighth Avenue North 6th Floor, William R. Snodgrass Tower Nashville, Tennessee 37243

ISSUANCE DATE: 06/11/2007 REQUEST NUMBER: 07162508 TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 10/22/2003 STATUS: ACTIVE CORPORATE EXPIRATION DATE: PERPETUAL CONTROL NUMBER: 0456137 JURISDICTION: TENNESSEE

FISHER EDUCATION CONSULTING, LLC %THOMAS FISHER 555 HICKORY BLVD MCMINNVILLE, TN 37110

REQUESTED BY: FISHER EDUCATION CONSULTING, LLC %THOMAS FISHER 555 HICKORY BLVD MCMINNVILLE, TN 37110

#### CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT "FISHER EDUCATION CONSULTING, LLC"

A LIMITED LIABILITY COMPANY DULY FORMED UNDER THE LAW OF THIS STATE WITH DATE OF FORMATION AND DURATION AS GIVEN ABOVE;
THAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE
EXISTENCE OF THE LIMITED LIABILITY COMPANY HAVE BEEN PAID:
THAT THE MOST RECENT LIMITED LIABILITY ANNUAL REPORT REQUIRED HAS BEEN FILED;
THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND
THAT ARTICLES OF TERMINATION OF THE EXISTENCE HAVE NOT BEEN FILED.

FOR: REQUEST FOR CERTIFICATE

MCMINNVILLE, TN 37110-0000

FISHER EDUCATION CONSULTING, LLC

ON DATE: 06/11/07

RECEIVED:

\$0.00

TOTAL PAYMENT RECEIVED:

\$40.00

RECEIPT NUMBER: 00004215175 ACCOUNT NUMBER: 00446478

\$40.00



555 HICKORY BLVD

RILEY C. DARNELL SECRETARY OF STATE