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EXAMINER

COVER LETTER

	Division of Corporations		
SUBJEC	T: Peak Brokerage Services (CC		
	Name of Limited Liability Company		
	osed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Ce, and check are submitted to register the above referenced foreign limited liability company to transact busines		
Please ret	turn all correspondence concerning this matter to the following:		
	· Allan Harkness		
	Name of Person		
	Plak Brokerage Services LC		
	597 W CIOSSVIlle Rd, Suite 200 Address	20	
	Koswell 64 30075 City/State and Zip Code	2012 JAN	i i
	هنگ بخر و		e lar
	E-mail address: (16 be used for future annual report notification)	-6 PM	Ţ
For furthe	er information concerning this matter, please call:	क क	
-	Kathi Mansfield at 678 400-2124 Name of Person Area Code & Daytime Telephone Number	37	
Ī	MAILING ADDRESS: Division of Corporations STREET ADDRESS: Division of Corporations		
	Registration Section Registration Section P.O. Box 6327 Clifton Building		
	Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301		
Enclose	d is a check for the following amount:		
	\$125.00 Filing Fee \$\bigcup \frac{\$130.00 \text{ Filing Fee & Certificate}}{\text{Certificate of Status}} \Bigcup \frac{\$155.00 \text{ Filing Fee & Certified Copy}}{\text{Certified Copy}} \Bigcup \frac{\$160.00 \text{ Filing Fee, Certificate}}{\text{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 FOREIG LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
A
1. Plak Brokerase Services LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the writte consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability
Company," "L.L.C," "LLC.")
2. Clor cia (Jurisdiction under the law of which foreign limited liability 3. 27-5097314 (FEI number, if applicable)
company is organized)
4. 2/16/11 (Date of Organization) 5. Perplual (Duration: Year limited liability company will cease to exist or "perpetual")
6. NO NO. (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
12,7 157 mmm
7. 597 w Crossville Kd, Suite 200
Roswell GA 30075
INTERLACTIONS OF PURCHASE UTILITY AND A STATE OF THE STAT
8. If limited liability company is a manager-managed company, check here S S S S S S S S S S S S S
9. The name and usual business addresses of the managing members or managers are as follows:
Allan Harkness
ROSWELL GA 30075
ROSWELL GA 30075
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: Sales of
security product, & Insurance
/ ·
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. I am aware that any 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.)
Allan Harkness 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 of the Limited Liability Company is:	
Peak Brokerage Services LLC	
If unavailable, the alternate to be used in the state of Florida is:	
	
2. The name and the Florida street address of the registered agent and office are:	
John Steele	2012 JAN SECRETI
4507 WOOD SINE Roll	SSEE
Florida Street Address (P.O. Box NOT ACCEPTABLE)	DF STATE OF
PACE FL 32571 City/Sute/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. 11014433

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Drive Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

PEAK BROKERAGE SERVICES, LLC

Domestic Limited Liability Company

was formed or was authorized to transact business on 02/16/2011 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 9th day of December, 2011

B: P.h-

Brian P. Kemp Secretary of State

Certification Number: 7860623-1 Reference: Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp