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ALLAHASSEF, FLORID

B. BOSTICK
JUL **2 6** 2013

CR2E027 (9/10)

#### **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: TAG PROPERTIE	5, 44	
	Name of Limited Liability Company	
The enclosed "Application by Foreign Limited L Existence, and check are submitted to register th	Liability Company for Authorization to Transact Business in Flor ne above referenced foreign limited liability company to transact l	ida," Certificate of ousiness in Florida
Please return all correspondence concerning this	s matter to the following:	
JAMES L. G.	15H	
	Name of Person	
TAG PAGPORTIE	5, 446	
	Firm/Company	
4330 CRITTEND	DEN DRIVE	
	Address	
LOUISVILLE, K	Firm/Company  DEN DRIVE  Address  4 40209  City/State and Zip Code	2
,	City/State and Zip Code	CLAD
jim qish @ iqi	So: (to be used for future annual report notification)	
	Particological design of the second of the	, Oi
For further information concerning this matter, p	please call:	
JAMES L. GISH	at (502 ) 435-1912	M 7:44
Name of Person	Area Code & Daytime Telephone Number	— <b>-</b>
MAILING ADDRESS:	STREET ADDRESS:	
Division of Corporations Registration Section	Division of Corporations Registration Section	
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a check for the following am	nount:	
\$125.00 Filing Fee \$130.00 Fi	iling Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee	·

### 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:

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:  1 TAG PAGES TIES LIC
1. TAG PROPERTIES 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 written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")
2. KENTUCKY (Jurisdiction under the law of which foreign limited liability company is organized)  3. 6/-1378599 (FEI number, if applicable)
4. 1//17/2000 5. PERPETUAL (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 4330 CRITTENDEN DRIVE, LOUISVILLE, KY 40209
(Street Address of Principal Office)
8. If limited liability company is a manager-managed company, check here 🔀
9. The name and usual business addresses of the managing members or managers are as follows:
ROBERT A. IEZZI, 4330 CRITTENDEN DRIVE, LOUISUILE, KY 40209
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:
REAL ESTATE RENTAL
Jamel. Lish, MANNEER
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.)
JAMES L. GISH

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.

TAG PROPERTIES 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:	_
CAPITOL CORPORATE SEXULES, INC. TO THE	
CAPITOL COSPORATE SEXULES, INC.  (Name)  (Name)  Florida Street Address (P.O. Box NOT ACCEPTABLE)  TALLAHASSEE FL 32301  City/State/Tip	inder 1
TAMAHASSEE FL 32301 City/State/Zip	1
Chy/state/2ip	•

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.

Ollanie Case asst-sec

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

# Commonwealth of Kentucky Alison Lundergan Grimes, Secretary of State

Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

#### **Certificate of Existence**

Authentication number: 141132

Visit https://app.sos.ky.gov/ftshow/certvalidate.aspx to authenticate this certificate.

I, Alison Lundergan Grimes, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

#### TAG PROPERTIES LLC

is a limited liability company duly organized and existing under KRS Chapter 14A and KRS Chapter 275, whose date of organization is November 17, 2000 and whose period of duration is perpetual.

I further certify that all fees and penalties owed to the Secretary of State have been paid; that articles of dissolution have not been filed; and that the most recent annual report required by KRS 14A.6-010 has been delivered to the Secretary of State.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal at Frankfort, Kentucky, this 19<sup>th</sup> day of July, 2013, in the 222<sup>nd</sup> year of the Commonwealth.

SECRETARY OF STATE OF



Alison Lundergan Grimes

Secretary of State

Commonwealth of Kentucky

141132/0505517