Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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H140000654353ABC

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA00000023

: (850)222-1092

Phone Fax Number

: (850)878-5368

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

Foreign Limited Liability Company POTTER & VIOLETTE HOLDINGS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Potter & Violette Holdi	ngs, LLC
	Name of Limited Liability Company
The enclosed "Application by Foreign Existence, and check are submitted to	Limited Liability Company for Authorization to Transact Business in Florida," Certificate of register the above referenced foreign limited liability company to transact business in Florida
Please return all correspondence conc	erning this matter to the following:
Audrey Blevins	
	Name of Person
Frost Brown Todd I	LC
	Firm/Company
250 West Main Stre	et, Suite 2800
	Address
Lexington, Kentuck	y 40507
	City/State and Zip Code
ablevins@fbtlsw.com	
	E-mail address: (to be used for future annual report notification)
For further information concerning th	is matter, please call:
Audrey Blevins	at (859) 244-3210
Name of Co	ontact Person Area Code Daytime Telephone Number
MAILING ADDRESS: Division of Corporations	STREET ADDRESS: Division of Corporations
Registration Section	Registration Section
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the follows:	owing amount: \$130.00 Filing Fee & \$\square\$\$ \$160.00 Filing Fee, Certificate Certificate of Status Certified Copy of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Centucky Jentucky Jentuc	if applicable)
urisdiction under the law of which foreign limited liability (FEI number company is organized) (Date first transacted business in Florida, if prior to registration.)	if applicable)
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7
	7,72
5071 W Irlo Bronson Memorial Hwy Unit A-B	SEE
Kissimmee, FL 34746	. 60
(Street Address of Principal Office)	
Same	2
dies C Barres Manager CON Wilds Bernard Managel Vice Clair A D Viceinstein W 1	ty to manage is/are:
dison E. Potter, Manager, 5071 W Irlo Bronson Memorial Hwy, Unit A-B, Kissimmee, FL 3	
dison E. Potter, Manager, 5071 W Irlo Bronson Memorial Hwy, Unit A-B, Kissimmee, FL 3	
	4746
Attached is an original certificate of existence, no more than 90 days old, duly	authenticated by the officia
	authenticated by the officised. (A photocopy is not
Attached is an original certificate of existence, no more than 90 days old, duly ing custody of records in the jurisdiction under the law of which it is organize the certificate is in a foreign language, a translation of the certificate.	authenticated by the officised. (A photocopy is not
Attached is an original certificate of existence, no more than 90 days old, duly ing custody of records in the jurisdiction under the law of which it is organize the certificate is in a foreign language, a translation of the certificate.	authenticated by the officined. (A photocopy is not the under oath of the translate

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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 Co	ompany is:	2011
Potter & Violette H	loldings, LLC		EG Z
If unavailable, th	ne alternate to be used in	n the state of Florida is:	TARY OF
2. The name and	d the Florida street addr	ress of the registered agent and office are:	7: 13
	C T Corporation System		
		(Name)	•
	1200 South Pine Island Ros Florida Stree	et Address (P.O. Box NOT ACCEPTABLE)	
	Plantation	FL 33324 City/State/Zip	_
liability company registered agent statutes relating accept the obliga Statutes.	y at the place designated and agree to act in this to the proper and compo ations of my position as a C T Corporation System By:	and to accept service of process for the about in this certificate, I hereby accept the appoint capacity. I further agree to comply with the lete performance of my dutles, and I am faming registered agent as provided for in Chapter Management Assistant Bootstan Resistant Bootstan (Signature)	intment as provisions of all iliar with and

Filing Fee for Application

Certified Copy (optional)

Designation of Registered Agent

Certificate of Status (optional)

\$ 100.00

\$ 25.00

\$ 30.00

\$ 5.00

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: 148934
Visit https://app.sos.ky.gov/fishow/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,

Potter & Violette Holdings, LLC

is a limited liability company duly organized and existing under KRS Chapter 14A and KRS Chapter 275, whose date of organization is March 17, 2014 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 17th day of March, 2014, in the 222nd year of the Commonwealth.



Alison Lundergan Grimes

Secretary of State

Commonwealth of Kentucky

148934/0882211