M14000002066

(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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03/17/14--01022--014 **160.00



3/21

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Next Solutions, LLC Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida
Please return all correspondence concerning this matter to the following: Name of Person
Next SolvHons, We Firm/Company 281 Industrial Blvd
Address Tyllanama, TV 37388 City/State and Zip Code
Sharner @ next-solution / lc. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: Sonya Harney at (431) Name of Contact Person Area Code Daytime Telephone Number
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301
Enclosed is a check for the following amount: \$\Begin{array}{cccccccccccccccccccccccccccccccccccc



March 18, 2014

SONYA HARNER 281 INDUSTRIAL BLVD TULLAHOMA, TN 37388

SUBJECT: NEXT SOLUTIONS, LLC

Ref. Number: W14000017206

We have received your document for NEXT SOLUTIONS, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 714A00005779

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

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUTEN THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA pility Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name anavailable, enter alternate name adopted for the purpose of transacting business in Floridi. The alternate name must include "Limited Lubility Company, ""L.L.C," or "LLC.") thorisdiction under the law of which foreign limited liability (Date first transacted business in Florida, if prior to registration.) (See Sections 605,090) & 605,0905, F.S. to determine pentity liability) Same above (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: 8. 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) Gignature of an authorized person the accordance with section 605 0203, F.S., the execution of this document constitutes an affirmation order the penalties of perjusy that the higgs-stated between the 4arm aware that any talse information submitted gra decument to the Department of State constitutes a double degree fehing as provided for in a AITIS

Typed or printed name of signee

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 Company is:
Next Solutions, LC
If unavailable, the alternate to be used in the state of Florida is:
Next Solution, LLC
2. The name and the Florida street address of the registered agent and office are:
Allan Croadson
9 VIZCOYO LONE Florida Street Address (P.O. Box NOT ACCEPTABLE)
Panama City Back FL 32413 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 605, 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)



STATE OF TENNESSEE Tre Hargett, Secretary of State

Division of Business Services William R. Snodgrass Tower 312 Rosa L. Parks AVE, 6th FL Nashville, TN 37243-1102

SONYA HARNER

SONYA HARNER 281 INDUSTRIAL BLVD TULLAHOMA, TN 37388

Request Type: Certificate of Existence/Authorization

Request #:

0122687

Issuance Date: 03/11/2014

Copies Requested:

March 11, 2014

Document Receipt

Receipt #: 1363009

Payment-Credit Card - State Payment Center - CC #: 154829267

Filing Fee:

\$22.25

\$22.25

Regarding:

Next Solutions, LLC

Filing Type:

Limited Liability Company - Domestic

Formation/Qualification Date: 10/09/2013

Status:

Active

Duration Term:

Perpetual

Business County: WILLIAMSON COUNTY

Control #:

734451

Date Formed:

10/09/2013

Formation Locale: TENNESSEE

Inactive Date:

CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

Next Solutions, LLC

- * is a Limited Liability Company duly formed under the law of this State with a date of incorporation and duration as given above;
- * has paid all fees, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business:
- * has appointed a registered agent and registered office in this State;
- * has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Secretary of State

Verification #: 006403323

Processed By: Cert Web User