(1/5)

Page 1 of 1

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000211968 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (850)222-1092 Phone Fax Number : (850)878-5368

phter the email address for this business entity to be used for future ⊇≰annual report mailings. Enter only one email address please.\*\* **英基版ail Address:** 

Foreign Limited Liability Company Develop Destin, LLC

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

Electronic Filing Menu

Corporate Filing Menu

Help

Registration Section
Division of Corporations

TO:

## COVER LETTER

•	Name of Lim	ited Liability Company	
The enclosed "Application by Foreig Existence, and check are submitted to	n Limited Liability Co register the above ref	mpany for Authorization to T erenced foreign limited liabil	ransact Business in Florida," Certificat lty company to transact business in Flo
Please return all correspondence cond	erning this matter to the	se following:	
		oy H. Tatum	<u> </u>
		Name of Person	
		relop Destin, LLC	
	1	Firm/Company	
·	545	i5 Troy Highway	
		Address	
<del></del>		mery, Alabama 36116	
	City/i	State and Zip Code	
	•	halateadcontractors.com ed for future annual report notifi	callon)
For further information concerning this	•		
Chris S. Simmons		nt (334 ) 206-32	352
Name of Cor	itact Person	Area Code Da	152 nytime Telephone Number
MAILING ADDRESS: Division of Corporations		ET ADDRESS: n of Corporations	
Registration Section		ation Section	
P.O. Box 6327	Cilfton	Building	
Tallahassee, FL 32314		xecutivo Center Circle ssee, PL 32301	
Enclosed is a check for the follow			
	130.00 Filing Fee & Carlificate of Status	□ \$155.00 Filing Fee & 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

I name unavailable, enter alternate name lability Company," "L.L.C," or "LLC.")	adopted for the purpose of transacting business in Florida. The si	iternate name must include "Limited	
Alabama	3、38-3934726	•	
(Jurisdiction under the law of which foreign limited liability company is organized)  (FBI number, if applicable)			
Not Occurred Yet			
(Dati (See see	e first transacted business in Florida, if prior to registration.) ctions 605.0904 & 605.0905, F.S. to determine penalty liability)	25	
5455 Troy Highway, Montgomery	, Alabama 36116	<u> </u>	
		70	
	(Street Address of Principal Office)	(j=) <del>(</del>	
Post Office Box 230817, Montgom	ery, Alabama 36123		
•		ုံ ့ တွ	
	(Mailing Address)		
	forming tenne one)	Em -	
The name, title or capacity as	nd address of the person(s) who has/have authorit	y to manage is/are:	
y H. Tatum, Manager, Same Addres	s as above		
,			
Attached is an original certific	ate of existence, no more than 90 days old, duly a	authenticated by the official	
ving custody of records in the	jurisdiction under the law of which it is organized	d, (A photocopy is not	
	a foreign language, a translation of the certificate	under oath of the translator	
st be submitted)	(h)		

Chris S. Simmons

Typed or printed name of signce

## 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	e of the Limited Liabilit	y Company is:	
If unavailabl	le, the alternate to be use	ed in the state of Florida is:	
2. The name	and the Florida street s	ddress of the registered agent and office are:	12 S
	C T Corporation System	n ·	SE SE
		(Name)	
	1200 South Pine Island	Road trest Address (P.O. Box NOT ACCEPTABLE)	
	Plantation	PL 33324	8: 07
	<del> </del>	City/State/Zip	7.5
liability comp registered ago statutes relati	cany at the place designa ent and agree to act in thing to the proper and con	nt and to accept service of process for the above ted in this certificate, I hereby accept the appo his capacity. I further agree to comply with the inplete performance of my duties, and I am fam as registered agent as provided for in Chapter	intment as provisions of all iliar with and
	C T Corporation Sys	(Signature)	

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

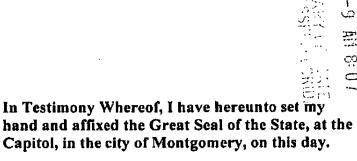
Nathan S. Giffin Asst. Secretary

Jim Bennett Secretary of State P.O. Box 5616 Montgomery, AL 36103-5616

## STATE OF ALABAMA

I, Jim Bennett, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that Develop Destin, LLC was formed in Montgomery County, Alabama on June 20, 2014. The Alabama Entity Identification number for this entity is 312-468. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.





20140714000021942

7/14/2014

Date

di sum

Jim Bennett

Secretary of State