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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT.

Fourth Street Capital, 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:

Eric Greenberg
Name of Person
Business Aviation Law Group PLLC
Firm/Company
344 Citation Point, Suite 203
Address
Naples, FL 34104
City/State and Zip Code
jonwbeen@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Eric Greenberg

...888

661-3223 ext. 2

Name of Contact Person

Area Code

Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 **STREET ADDRESS:**

Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Enclosed is a check for the following amount:

■ \$125.00 Filing Fee

□ \$130.00 Filing Fee & Certificate of Status

□ \$155.00 Filing Fee & Certified Copy

□ \$160.00 Filing Fee, Certificate 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 REGION FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1. Fourth Street Capital, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "LLC.")	STER A	色色	THE STATE
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Lin Liability Company," "L.L.C," or "LLC.") 2. Georgia (Jurisdiction under the law of which foreign limited liability company is organized) 3. Georgia (FEI number, if applicable)	- nited	THE STATE OF THE S	
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 5. 1000 Johnson Ferry Road, Suite A125	-		৵
Marietta, GA 30068 (Street Address of Principal Office) 6. 1000 Johnson Ferry Road, Suite A125		14 DEC	
Marietta, GA 30068 (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:	0 T = 10 M	15 PH 3	
Stephen Been, Manager of Member		3: F	
8. Attached is an original certificate of distence, no more than 90 days old, duly authenticated by the off 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 transmust be submitted) Signature of an authorized person (In accordance with section 605,0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated here	Slator		

Stephen Been

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.

	t Capital, LLC
If unavailable, the alter	nate to be used in the state of Florida is:
2. The name and the F	orida street address of the registered agent and office are:
<u>Pa</u>	rrish, White & Yavnell, P.A.
34	BI Pine Ridge Road, Suite 101 Florida Street Address (P.O. BOX NOT ACCEPTABLE)
Naple	FL 34109 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.

Ff (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 GEORGIA

Secretary of State Corporations Division 313 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 CONTROL NUMBER DATE INC/AUTH/FILED : October 28, 2014 JURISDICTION

: 14106230 : Georgia

PRINT DATE

: December 07, 2014

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

> Fourth Street Capital, LLC A Domestic Limited Liability Company

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. 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.

Brian P. Kemp Secretary of State

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