# M150000698

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#### **COVER LETTER**

**Registration Section** 

■ \$125.00 Filing Fee

□ \$130.00 Filing Fee & Certificate of Status

TO:

SUBJECT: Peachtree Storage, LLC		_	
Name	e of Limited Liability Company		
	oility Company for Authorization to Transact Business in Florid bove referenced foreign limited liability company to transact bu		
Please return all correspondence concerning this ma	atter to the following:		
Matthew Smoot	•	_	
	Name of Person		
Truman Group Holdings, L	LC		
	Firm/Company	_	
7624 Nottinghill Sky Drive		_	
	Address		
Apollo Beach, FL 33572		<del></del>	
	City/State and Zip Code		
carriepsmoot@gmail.com			
E-mail address:	(to be used for future annual report notification)	2015	
For further information concerning this matter, please	se call:	IS JAN I	T
Matthew Smoot	at (801 ) 706-5522	·	i produce nor
Name of Contact Person	Area Code Daytime Telephone Number	2 <b>79</b>	
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	PH 4: 07	Pauger

□ \$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 REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Peachtree Storage, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Co	mosny""I C "or "I C"
(wante of Foreign Entitled Enabling Company, must include Entitled Enabling Co	inputy, D.E.C., or D.C.
f name unavailable, enter alternate name adopted for the purpose of transacting business in Floability Company," "L.L.C," or "LLC.")	rida. The alternate name must include "Limited
Utah 3, 47-2422632	
	El number, if applicable)
(Date first transacted business in Florida, if prior to registr (See sections 605.0904 & 605.0905, F.S. to determine penalty	ation.) y liability)
526 Peachtree Street	
Cocoa, FL 32922	
(Street Address of Principal Office)	
7624 Nottinghill Sky Drive	
Apollo Beach, FL 33572	
(Mailing Address)	
The name, title or capacity and address of the person(s) who has/have	e authority to manage is
atthew Smoot and Carrie Smoot - MAPM	2
24 Nottinghill Sky Drive	
ollo Beach, FL 33572	STATION
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Attached is an original certificate of existence, no more than 90 days of	•
ving custody of records in the jurisdiction under the law of which it is ceptable. If the certificate is in a foreign language, a translation of the comparison of the compari	
ist be submitted)	certificate under oam of the translator
ist be submitted)	
Matter June	
Signature of an authorized person	
accordance with section 605.0203, F.S., the execution of this document constitutes in affirmation under aware that any false information submitted in a document to the Department of State constitutes a third of the Department of State constitutes a third of the Department of State constitutes as the document to the Department of State constitutes as the Department of State constitutes are the Department of State constitutes as the Department o	

Matthew Smoot

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 o	of the Limited Liability Con	npany is:			
Peachtree St	orage, LLC				
If unavailable,	the alternate to be used in t	he state of Florida is:			
2. The name a	nd the Florida street addres	s of the registered agent and office are:		<del></del>	**************************************
	Matthew Smoot				
		(Name)			
			≥	201	
7624 Nottinghill Sky Drive			3>211	<u> </u>	"
	Florida Street A	Address (P.O. Box NOT ACCEPTABLE)	F-71	2015 JAN 14	CZSCIONIS.
			SSI SSI	+	
	Apollo Beach	<sub>FL</sub> 33572	Li Ch	P	11
		City/State/Zip	S IATE LORIDA	4:07	Paristan,
-liability compa	ny at the place designated in	nd to accept service of process for the abo In this certificate, I hereby accept the app Opacity. I further agree to comply with th	ove state pointmen	ed lim et as	

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.

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



#### **Utah Department of Commerce**

**Division of Corporations & Commercial Code** 

160 East 300 South, 2nd Floor, PO Box 146705 Salt Lake City, UT 84114-6705 Service Center: (801) 530-4849

Toll Free: (877) 526-3994 Utah Residents

Fax: (801) 530-6438

Web Site: http://www.commerce.utah.gov

01/10/2015 9234660-016001102015-604278

### **CERTIFICATE OF EXISTENCE**

**Registration Number:** 

9234660-0160

**Business Name:** 

PEACHTREE STORAGE, LLC

Registered Date:

December 01, 2014

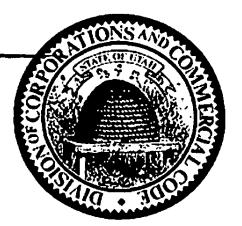
Entity Type:

LLC - Domestic

**Current Status:** 

Good Standing

The Division of Corporations and Commercial Code of the State of Utah, custodian of the records of business registrations, certifies that the business entity on this certificate is authorized to transact business and was duly registered under the laws of the State of Utah. The Division also certifies that this entity has paid all fees and penalties owed to this state; its most recent annual report has been filed by the Division (unless Delinquent); and, that Articles of Dissolution have not been filed.



Hathy Berg
Kathy Berg

Director
Division of Corporations and Commercial Code