M150	10002431
(Requestor's Name) (Address)	000269881700
(Address) (City/State/Zip/Phone #)	
(Business Entity Name) (Document Number)	03/13/1501006013 **125.00
Certified Copies Certificates of Status Special Instructions to Filing Officer:	SSEE FLORIDA
Office Use Only	T. Buron APR 2 10

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Mar 06 2015 2:56PM	OLIVER INSURF	INCE AGENCY	4782854606	p .2
nter de la companya d La companya de la comp	,		۴.	
	CO	VER LETTER		
TO: Registration Section Division of Corporation	ons-			
SUBJECT: Xtreme E	Entertainmer	It Boyntor	Beach LLC	
The enclosed "Application by Fe Existence, and check are submitt	areign Limited Liability Co	mpany for Authorizar	ion to Transact Business in Florida," d liability company to transact busin	Cortificate of ess in Florida.
Please return all correspondence				
Neil Ol	iver			
		Name of Person	A	
Xtreme	Entertainme	ent Boynto	on Beach LLC	
		Firm/Company		
26 Lak	eshore Drive	1		
		Address		
Jackso	n, GA 3023	3		
	City/	State and ZIP Code		
kimble@	Dinflatablein	surance.c	om	
	E-mail address: (10 be us	ed for luture annual rep	er notification)	
For further information concernin	g this matter, please call:			
Neil Oliver		,770 ₍₁₎	313-8865	
Name o	of Contact Person	Aren Code	Daytime Telephone Number	
MAILING ADDRESS: Division of Corporations Registration Section P.O., Box 6327 Tailahastee, FL 32314	Division Regist Cliftar 2661 B	ET ADDRESS: on of Corporations ration Section 1 Building Sxeoutive Center Circl assee, FL 32301	0	
Enclosed is a check for the f	ollowing amount: D \$1.30.00 Filing Fee & Certificate of Status	□ \$155.00 Filing Certified Gopy		

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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 RELISTER A. FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Xtreme Entertainment Boynton Beach, LLC

(Nome of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate mane adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company,""L.L.C." or "LEC.")

2.	Georgia	

company is organized)

(Juridiction under the law of which foreign limited liability

47-3322563 (FEI number, if applicable)

4.		™ ∽		
	(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine pointly liability)		- 1 0-	ans jake
5.	801 North Congress Avenue		far I	
	Boynton Beach, FL 33426	ch-K me	ਹ ਸ	27-72196
	(Street Address of Principal Office)	-15	Ž	-111
6.	26 Lakeshore Dr	LORI		As were
	Jaokson, GA 30233	л. С.л.	ŝ	

(Mailing Address)

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Neil Oliver, Member, 26 Lakeshore Dr Jackson, GA 30233

Darrell Alton, Member, 242 W Main St #218 Hendersonville TN 37075

8. Attached is an original certificate of existence, no more than 90 days old, duly suthenticated 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)

Signature of an authorized person

(In accordance with section 605,0203, 4.5, the execution of this document constitutes an uffirmation under the penalties of perjury that the first stated herein are true. I am aware that any files information submitted in a document to the Department of State constitutes a third degree fainty as provided for in v.817.135. F.S.)

Neil Oliver

Typed or printed name of signee

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Mar 06 2015 2:56PM OLIVER INSURANCE AGENCY

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

4782854606

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: Xtreme Entertainment Boynton Beach LLC

If unavailable, the alternate to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:

Brian Baird			5 MAR	-ACAJ
·	(Name)		20	44
		SS SS	ω	ţ
31705 Long Acres Drive			, q	
Florida Street Address (P.O. Box NOT ACCEPTABLE)		r - o		ہ دسم
		TATE ORID,	ୁ ଅ	÷.
Sorrento	51, 32776	2 2 7	co	
····	Cirv/Qista/Zin			

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 805, Florida Statutes.

(Signature)

- \$ 100.00 Filing Fee for Application
- S 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (optional)
- 5 5.00 Certificate of Status (optional)

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5.

Control No.: 15023273

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STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF ORGANIZAT

I, Brian P. Kemp, The Secretary of State and the Corporation Commissioner of the State of: Georgia, hereby certify under the seal of my office that

> **Xtreme Entertainment Boynton Beach, LLC** a Domestic Limited Liability Company

is hereby issued a CERTIFICATE OF ORGANIZATION under the laws of the State of Georgia on **March 04, 2015** by the filing of all documents in the Office of the Secretary of State and by the paying of all fees as provided by Title 14 of the Official Code of Georgia Annotated.

WITNESS my hand and official seal in the City of Atlanta and the State of Georgia on March 05, 2015



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Brian P. Kemp Secretary of State

Tracking #: MMXufdGM