# M15000602627

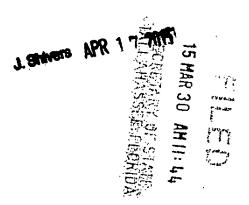
(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
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February 11, 2015

THOMAS DENNIS 445 METROPLEX DR NASHVILLE, TN 37211

SUBJECT: UNIFIED PROPERTY RESTORATION, LLC

Ref. Number: W15000010230

We have received your document for UNIFIED PROPERTY RESTORATION, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

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: 915A00002899

#### **COVER LETTER**

TO:	Registration Section Division of Corporation	18				
SUBJE	CT: UNIFIED	PROPERTY	C Cof Limited	ESTORATION Liability Company	LC	<del></del>
				any for Authorization to Tranced foreign limited liability		
Please re	eturn all correspondence	concerning this matt	ter to the f	ollowing:		
		THOMAS	Nar	ne of Person		-
	U~	IFIED PRO		RESTOCATION 12/Company	ა	_
		145 Met	rofu	EX DRIVE		_
		NASHYILLE	E 7 City/Sta	N 37211 te and Zip Code		_
		E-mail address: (	<b>S Q </b> و to be used	XRESTURATION for future annual report notific	oation)	<del></del>
For furth	ner information concerning	g this matter, please	e call:	ar 615 77	5-7954	
	Name	of Contact Person			ytime Telephone Number	_
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		Division Registrat Clifton B 2661 Exc	F ADDRESS: of Corporations tion Section Building ecutive Center Circle see, FL 32301		
Enclos	ed is a check for the s	following amour  \$130.00 Filing  Certificate of \$	Fee &	□ \$155.00 Filing Fee & Certified Copy	□ \$160.00 Filing Fee, of Status & Certifie	

### 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:
1. Unified Property Restoration, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
UP Porman > 110
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited
Liability Company," "L.L.C," or "LLC.")
2. TENNESSEE (Jurisdiction under the law of which foreign limited liability)  3. 47-2603691 (FEI number, if applicable)
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4.
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 16 CLARA LANE SUITE IS
SANTA ROSA BEACH, FL 32459
(Street Address of Principal Office)
6. 445 METROPLEX Drive SE OF
11 2721
MASHUILLE, 70 3721
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
THOMAS DENNIS 221 OW TUSCULUM RD. ANTIOCH, TN 37013
Tital - Vice President / General Manager
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)
$(1 \ )$ .
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 herein are true.
am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)
Homes Dennis
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:	
UNIFIED PROPERTY RESTOR	ATTOW, LLC
If unavailable, the alternate to be used in the state of	Florida is:
UP RESTURATION, LLC	
2. The name and the Florida street address of the re-	gistered agent and office are:
JERRY FOX	
(Nan	ne)
Florida Street Address (P.O	
	4
LYNN HAVEN	FL 32444
City	F.
Having been named as registered agent and to accept liability company at the place designated in this certification registered agent and agree to act in this capacity. If statutes relating to the proper and complete performance accept the obligations of my position as registered agent Statutes.	ficate, I hereby accept the appointment as urther agree to comply with the provisions of all unce of my duties, and I am familiar with and
(Signature)	
\$ 25.00 Desig \$ 30.00 Certif	Fee for Application nation of Registered Agent ied Copy (optional) icate 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

THOMAS DENNIS

221 OLD TUSCULUM RD ANTIOCH, TN 37013

January 29, 2015

Request Type: Certificate of Existence/Authorization

Request #:

0151996

Issuance Date: 01/29/2015

Filing Fee:

Copies Requested:

**Document Receipt** 

Receipt #: 001808408

\$22.25

Payment-Credit Card - State Payment Center - CC #: 160437406

\$22.25

Regarding:

Unified Property Restoration, LLC

Filing Type:

Limited Liability Company - Domestic

Formation/Qualification Date: 12/22/2014

Status:

Active

**Duration Term:** Perpetual

**Business County:** 

Control #:

782147

Date Formed:

12/22/2014

Formation Locale: TENNESSEE

Inactive Date:

#### CERTIFICATE OF EXISTENCE

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

### **Unified Property Restoration, 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 #: 010464832

Processed By: Cert Web User