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COVER LETTER

	istration Section ision of Corporation	s	r.	,		
CUBINCE	CBSandestin, LLC					
SUBJECT:		Name of L	imited Liability C	ompany		
The enclosed Existence, an	l "Application by For ad check are submitted	eign Limited Liability Comp d to register the above refere	any for Authorizat nced foreign limit	ion to Tra ed liability	nsact Business in Florida," (company to transact busine	Certificate of ess in Florida
Please return	all correspondence c	oncerning this matter to the f	following:			
	Cheryl B. Benc	e				
		Na	me of Person			
	CBSandestin, L	LC				
Firm/Company						
	1024 Merion D	rive				
Address						
	Calera, AL 350	40				
		City/St	ate and Zip Code			
	babetteb@palom	arins.com				
		E-mail address: (to be used	for future annual	report not	ification)	
For further in	nformation concernin	g this matter, please call:				
Ch	ristopher S. Hamer		205 at (218-443	36	
_	. Name o	f Contact Person	Area Code	Day	time Telephone Number	
Div Reg P.O	ision of Corporations distration Section Box 6327 lahassee, FL 32314			Division of Registrati Clifton B 2661 Exe	ADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301	
	a check for the follow \$125.00 Filing Fee	ing amount: \$\square \text{\$\square\$}\$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filin Certified Copy	ig Fee &	☐ \$160.00 Filing Fee, Ce of Status & Certified Cop	

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. CBSandestin, LLC (Name of Fore	eign Limited Liability Company;	must inclu	ide "Limited Liab	ility Company," "L.L.C.," or	"1.f.C.")	_
, ,	- <u> </u>					
If name unavailable, enter all iability Company," "L.L.C.	Iternate name adopted for the pur	pose of tra	msacting business	in Florida. The alternate nan	ne must include "Li	mited
, ALABAMA	W. M.C. y	3.	47-4286886			
	of which foreign limited liability			(FEI number, if applicable))	_
N/A						
	(Date first transacted bu (See sections 605,0904 &	siness in F	lorida, if prior to	registration.)	-	
1024 Merion Drive					_	
Calera, AL 35040						
	(Street Address	of Princip	al Office)		_	
. 1024 Merion Drive						
Calera, Al. 35040						
•	(Maili	ng Addres	s)		_	
. Name and street addres	ss of Florida registered agent:	(P.O. Bo	x <u>NOT</u> accepta	hle)		
- Name:	Tony Simpson, Esq.					
Office Address:	60 2nd Street, Suite 201					
	Shalimar		<u>-</u>	, Florida <u>32579</u>		
Registered agent's accep	(City)	7.64	(Zip code)	_	
his application, I hereby with the provisions of all	gistered agent and to accept accept the appointment as restatutes relative to the proper ition as registered agent.	gistered a	igent and agree	to act in this capacity. I;	further agree to c	omp
	(Re	gistered ag	gent's signature)		- 1386 78	? .
8. The name, title or capa	acity and address of the person	n(s) who l	nas/have authori	ty to manage is/are:	70 PE	e j*
Cheryl B. Bence, Member	r, 1024 Merion Drive, Calera,	AL 3504	0		(4) (4) (4) (4) (4) (4) (4) (4)	ą.
Charles Colby Bence, Me	ember, 1306 Lochness Drive,	Allen, TX	75013		28 100	
urisdiction under the law	of existence, no more than 90 of which it is organized. (If the					
urisdiction under the law	of which it is organized. (If thubmitted)	e certifica	ate is in a foreig	n language, a translation of		
	of which it is organized, (If th	e certifica	ate is in a foreig	n language, a translation of		

(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. I 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.)

Cheryl B. Bence, Member

John H. Merrill Secretary of State

P.O. Box 5616 Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, 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 CBSandestin, LLC was formed in Shelby County, Alabama on April 10, 2015. The Alabama Entity Identification number for this entity is 333-488. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



20150522000023120

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day?

5/22/2015

Date

X. W. Merill

John H. Merrill

Secretary of State