- MI5000	007034
(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)	$\frac{1}{10000000000000000000000000000000000$
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	SING 27 PH I:II
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	COVER LETTER	
O: Registration Division of C		
SUNSE	r KING, LLC	
UBJECT:		
	Name of Limited Liability Company	
	tion by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of re submitted to register the above referenced foreign limited liability company to transact business in Florida	
lease return all corre	spondence concerning this matter to the following:	
ТН	EODORE T. CARELLAS	
	Name of Person	
тн	EODORE T. CARELLAS, P.C.	
	Firm/Company	
D.C.		
P.0	BOX 2599	
	Address	
RIN	ICON, GA 31326	
	City/State and Zip Code	
jdrav	/dy@carellaslaw.com	
	E-mail address: (to be used for future annual report notification)	
or further informatio	n concerning this matter, please call:	
Janelle Drav	ydy 912 826-7100	
	at () Name of Contact Person Area Code Daytime Telephone Number	
MAILING A		
Division of C	Corporations Division of Corporations	
Registration P.O. Box 63		
Tallahassee,	·· · · · · · · · · · · · · · · · · · ·	
	Tallahassee, FL 32301	
Enclosed is a check fo □ \$125.00 F	or the following amount: iling Fee 🛛 \$130.00 Filing Fee & 🗖 \$155.00 Filing Fee & 🗖 \$160.00 Filing Fee, Certificate	

 APPLICATION BY FOREIGN LIMITED LIABILITY COMPA 	NY FOR AUTHORIZATION TO TRANSACT BUSINESS
IN FLOR	IDA

IN COMPLIANCE WITH SECTION 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

SUNSET KING, LLC 1.

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

SUNSET KING PARTNERS, LLC

(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.") 3.

2. GEORGIA

(Junsdiction under the law of which foreign limited liability company is organized)	(PBI number, if applicable)

(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, P.S. to determine penalty liability)

19 MARKET STREET

BEAUFORT, SC 29906

6		TALL	
	·		NG 2
	(Mailing Address)		
7. Name and street addre	sa of Florida registered agent: (P.O. Box <u>NOT</u> accepts	ablo)	
Name:	CT CORPORATION SYSTEM	~	
Office Address:	1200 SOUTH PINE ISLAND ROAD	_	
	PLANTATION	Florida 33324	

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Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties end contramiliar with and accept the obligations of my posifian as registered again Jeniter Jeniter Secretary Vice President & Assistant Secretary

(Registered agent's algnature)

(Zip code)

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

(City)

9. Attached is a 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, (if the exiting is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

Signature of an anthorized person

This document is executed in accordance with section 605.0203 (1) (b), Plorida Statutes. 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.

GARY BELLOMY

Typed or printed name of signce

Control Number : 15081084

STATE OF GEORGIA

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

SECKELALL OF STATE TALLAHASSEE, MORIDA	15 AUG 27 PH 1: 11	
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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

SUNSET.KING LLC

a Domestic Limited Liability Company

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

Docket Number Date Inc/Auth/Filed Jurisdiction Print Date Form Number : 12142159 : 08/20/2015 : Georgia : 8/26/2015 : 211

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Brian P. Kemp Secretary of State