

MIS000009604

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

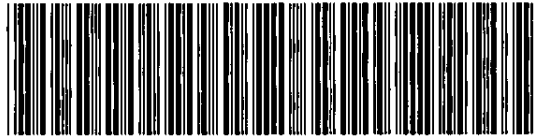
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**DATE: 11/25/15**

**NAME: RELIANCE PARTNERS, LLC**

**TYPE OF FILING: APPLICATION**

**COST: 125.00**

**RETURN: PLAIN COPY PLEASE**

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**ACCOUNT: FCA000000015**

**AUTHORIZATION: ABBIE/PAUL HODGE**

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*\* File second \**

**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. Reliance Partners, LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "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.")
2. Tennessee 3. 26-4244586  
(Jurisdiction under the law of which foreign limited liability company is organized) (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 penalty liability)
5. 800 Market Street, Suite 200  
Chattanooga, TN 37402  
(Street Address of Principal Office)
6. 800 Market Street, Suite 200  
Chattanooga, TN 37402  
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: NRAI Services, Inc.

Office Address: 1200 South Pine Island Road  
Plantation, Florida 33324  
(City) (Zip code)

**Registered agent's acceptance:**

*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 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, and I am familiar with and accept the obligations of my position as registered agent.*

BY: NRAI Services, Inc.  
Natalie Lolba-Paul  
(Registered agent's signature)  
Natalie Lolba-Paul - Special Assistant Secretary

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

SEE ATTACHED SHEET

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 certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

[Signature]  
Signature of an authorized person

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

James B. Large, Manager

Typed or printed name of signer

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TALLAHASSEE, FLORIDA

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**FLORIDA DEPARTMENT OF STATE**

**ATTACHMENT  
TO APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY  
FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**

**RELIANCE PARTNERS, LLC**

8. The name, title or capacity and address of the persons who have authority to manage are:

Theodore W. Alling, Manager, 800 Market Street, Suite 200, Chattanooga, TN 37402-2632.

Barry P. Large, Manager, 800 Market Street, Suite 200, Chattanooga, TN 37402-2632.

G. Allan Davis, Manager, 800 Market Street, Suite 200, Chattanooga, TN 37402-2632.

James B. Large, Manager, 800 Market Street, Suite 200, Chattanooga, TN 37402-2632.

W. Miller Welborn, Manager, 800 Market Street, Suite 200, Chattanooga, TN 37402-2632.

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**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

**CHAMBLISS, BAHNER & STOPHEL, P.C.**  
605 CHESTNUT STREET, SUITE 1700  
CHATTANOOGA, TN 37450

November 4, 2015

**Request Type: Certificate of Existence/Authorization**  
Request #: 0180336

Issuance Date: 11/04/2015  
Copies Requested: 1

## Document Receipt

Receipt # : 002299079	Filing Fee:	\$22.25
Payment-Credit Card - State Payment Center - CC #: 165690890		\$22.25

<b>Regarding:</b>	<b>Reliance Partners, LLC</b>		
Filing Type:	Limited Liability Company - Domestic	Control # :	596896
Formation/Qualification Date:	02/23/2009	Date Formed:	02/23/2009
Status:	Active	Formation Locale:	TENNESSEE
Duration Term:	Perpetual	Inactive Date:	
Business County:	HAMILTON COUNTY		

## CERTIFICATE OF EXISTENCE

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

**Reliance Partners, 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 filed the most recent annual report required with this office;
- \* 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.

*Tre Hargett*  
Tre Hargett  
Secretary of State

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