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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	> #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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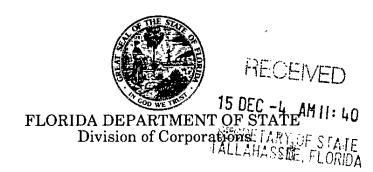
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DEC OF TOPS

J. HARRIS

COVER LETTER

TO:		ration Section n of Corporation	ns		4	ı	
SUBJE	Sa CT:	nd County Studio	os				
SCIDE	C1		Name of	Limited Liability (Company		
						nsact Business in Florida," (company to transact busine	
Please re	eturn all	correspondence of	concerning this matter to the	following:			
		James L. Sipes					
				lame of Person			
		Sand County S	tudios				
			F	irm/Company			
		1272 W Spring	Street SE				
				Address			
		Smyrna, GA 30	0080				
			City/S	State and Zip Code			
		jamessipes@hot	mail.com				
	•		E-mail address: (to be use	ed for future annual	report not	ification)	
For furth	her infor	mation concernin	g this matter, please call:				
	James	L. Sipes		206 at (755-6 0	74	
		Name o	of Contact Person	Area Code	Day	time Telephone Number	
	Divisio Registra P.O. Bo	ING ADDRESS: n of Corporations ation Section ox 6327 ssee, FL 32314	S		Division Registrati Clifton B 2661 Exe	ADDRESS: of Corporations ion Section uilding cutive Center Circle ee, FL 32301	
Enclose		eck for the follow 5.00 Filing Fee	ring amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filir Certified Copy	ng Fee &	■ \$160.00 Filing Fee, Cer of Status & Certified Copy	



November 19, 2015

JAMES L SIPES 1272 W SPRING STREET SE SMYRNA, GA 30080

SUBJECT: SAND COUNTY STUDIOS LLC

Ref. Number: W15000072513

We have received your document for SAND COUNTY STUDIOS LLC and your check(s) totaling \$160.00. However, the document has not been filed and is being retained in this office for the following:

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

Please return 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.

Jenna D Harris Regulatory Specialist II

Letter Number: 615A00024505_



November 3, 2015

JAMES L SIPES 1272 W SPRING STREET SE SMYRNA, GA 30080

SUBJECT: SAND COUNTY STUDIOS LLC

Ref. Number: W15000072513

We have received your document for SAND COUNTY STUDIOS LLC and your check(s) totaling \$160.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return 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.

Jenna D Harris Regulatory Specialist II

Letter Number: 515A00023289

2015 DEC -4 PM 1: 46

. APPEICATION 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:

	LC eign Limited Liability Company; must include	e "Limited Liability Company," "L.L.C.,	" or "LLC.")
If name unavailable, enter al iability Company," "L.L.C,	ternate name adopted for the purpose of trans " or "LLC.")	sacting business in Florida. The alternate	name must include "Limited
Georgia, USA	3.	45-5429028	
	of which foreign limited liability	(FEI number, if applications)	able)
None			
	(Date first transacted business in Flo (See sections 605.0904 & 605.0905, F.	rida, if prior to registration.) S. to determine penalty liability)	
1272 W Spring Street	· ·		
Smyrna, GA 30080			
	(Street Address of Principal	Office)	
5. 1272 W Spring Street S	SE		
Smyrna, GA 30080		•	
	(Mailing Address)		
Name and street address	ss of Florida registered agent: (P.O. Box	NOT acceptable)	500 + 1
	Theresa Schober	1401_acceptable)	And the second s
Name:			
Office Address:	1902 Florrie Court		
	North Fort Myers	, Florida 33917	<u> </u>
	(City)	(Zip code))
laving been named as re	gistered agent and to accept service of p	process for the above stated limited t s registered agent and agree to act is	
esignated in this applica o complywith the provisi	ons of all statutes relative to the proper of my position as registered agent. (Registered age	and complete performance of my di	
lesignated in this applica o complywith the provisi accept the obligations of i	ons of all statutes relative to the proper of my position as registered agent. (Registered age:	and complete performance of my di	
designated in this applicate ocomplywith the provising accept the obligations of a second sec	(Registered agent acity and address of the person(s) who ha	and complete performance of my dunt's signature) us/have authority to manage is/are:	
designated in this applicate of complywith the provision occupt the obligations of the control o	ons of all statutes relative to the proper of my position as registered agent. (Registered age:	and complete performance of my dunt's signature) as/have authority to manage is/are: 30080	
designated in this applicate of complywith the provision accept the obligations of the complyment of the complete of the compl	(Registered agent.) (Register	and complete performance of my durint's signature) as/have authority to manage is/are: 30080 duly authenticated by the official have	ring custody of records in th
designated in this applicate of complywith the provision accept the obligations of the control o	(Registered agent.) (Register	and complete performance of my durint's signature) as/have authority to manage is/are: 30080 duly authenticated by the official have	ring custody of records in th

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.

Typed or printed name of signee

Control Number: 12045457

STATE OF GEORGIA

Secretary of State

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

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

SAND COUNTY STUDIOS 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

: 12224050 : 05/30/2012 : Georgia : 11/30/2015 : 211



Brian P. Kemp Secretary of State