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SECRETARY OF STATE
SECRETARY OF STATE

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## **COVER LETTER**

TO: Registration Section

Divi	sion of Corporation	ns						
SUBJECT:	Alexander Thomps	on Arnold PLLC						
Bebuile 1.		Name of Limited Liability Company						
The enclosed Existence, an	"Application by Fo d check are submitte	reign Limited Liability Com ed to register the above refer	pany for Authoriza enced foreign limi	ation to Tra ited liability	ansact Business in Florida y company to transact bus	," Certificate of siness in Florid	of la	
Please return	all correspondence	concerning this matter to the	following:					
	Jerry D. Smith							
	Name of Person							
	Alexander Thompson Arnold PLLC					_		
	Firm/Company							
	624 E. Reelfoot Avenue							
	Address							
	Union City, Te	nnessee 38261				_		
		City/S	tate and Zip Code	;		_		
	lblurton@atacpa	net				_		
		E-mail address: (to be use	d for future annua	l report not	ification)	誓 ~	3	
For further in	formation concerning	g this matter, please call:			ACT	AND DEC	_	
Jerr	y D. Smith		731 at (	642-07	71 SSER	S DEC 23 P	П	
	Name o	of Contact Person	Area Code	Day	time Telephone Number	ה לם <b>ל</b>		
Divi Regi P.O.	ILING ADDRESS: sion of Corporations istration Section Box 6327 ahassee, FL 32314			Division Registrat Clifton B 2661 Exe	of Corporations ion Section wilding secutive Center Circle see, FL 32301	(F. 33)		
	check for the follow 125.00 Filing Fee	ring amount:  \$\Bigsize \text{\$\text{\$130.00 Filing Fee & Certificate of Status}}\$	□ \$155,00 Filin Certified Copy		☐ \$160.00 Filing Fee, of Status & Certified C			

# 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: Alexander Thompson Arnold PLLC, 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.") Tennessee (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) 6/1/2015 (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 624 E. Reelfoot Ave. Union City, Tennessee 38261 (Street Address of Principal Office) 624 E. Reelfoot Ave. Union City, Tennessee 38261 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) CT Corporation System Name: 1200 S. Pine Island Rd. Office Address: Plantation 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. 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Jerry D. Smith, Member 165 Peppers Drive Paris, Tennessee 38242 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)

submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Jerry D. Smith

Typed or printed name of signee

Ignature 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



# 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

JOHN L. WARNER JR.

308 W. CHURCH ST. UNION CITY, TN 38261 December 1, 2015

Request Type: Certificate of Existence/Authorization

Request #:

0186503

Issuance Date: 12/01/2015

Copies Requested:

**Document Receipt** 

Receipt #: 002327981

Filing Fee:

\$22.25

Payment-Credit Card - State Payment Center - CC #: 166098065

\$22.25

Regarding:

**ALEXANDER THOMPSON ARNOLD PLLC** 

Filing Type: Limited Liability Company - Domestic Formation/Qualification Date: 01/29/1997

Status:

Active

**Duration Term:** Perpetual

Business County: OBION COUNTY

Control #:

325028

Date Formed:

01/29/1997 Formation Locale: TENNESSEE

Inactive Date:

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

### ALEXANDER THOMPSON ARNOLD PLLC

- \* 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.

Secretary of State

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