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SECRETARY OF STATE
ALL LANSSEE, FLORIDA

JAN 28 2016

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FLORIDA DEPARTMENT OF STATE Division of Corporations

January 26, 2016

FRANCIS R. MELLON, JR. P.O. BOX 3117 MORGANTON, NC 28680

SUBJECT: COLLETT CRE SERVICES LLC

Ref. Number: W16000005410

We have received your document for COLLETT CRE SERVICES 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 your document, along with 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.

Stacey M Mason Regulatory Specialist II

Letter Number: 316A00001696

COVER LETTER

TO:	Registration Section Division of Corporation	ns						
Crimin	e Cm	Colle	ett CRE Services L	LC				
SORT	Name of Limited Liability Company							
		reign Limited Liability Com ed to register the above refer						
Please	return all correspondence	concerning this matter to the	following:					
		Fran	ncis R. Mellon, Jr.					
Name of Person								
Collett & Associates								
	Firm/Company							
	PO Box 3117							
Address								
	Morganton, NC 28680							
	City/State and Zip Code							
	fmellon@collettre.com							
		E-mail address: (to be use	d for future annual r	eport not	ification)			
For fur	ther information concerning	g this matter, please call:						
	Fra	ank Melion	828 at (١	437 - 8674			
	Name o	of Contact Person	Area Code	Day	time Telephone Number			
	MAILING ADDRESS: Division of Corporation: Registration Section P.O. Box 6327 Tallahassee, FL 32314	•	[Division Registrati Clifton B 2661 Exe	of Corporations ion Section uilding cutive Center Circle iee, FL 32301			
Enclose	ed is a check for the follow \$125.00 Filing Fee	ving amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filing Certified Copy	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: Collett CRE Services 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.") State of North Carolina 81 - 1110987 (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 118C West Union Street Morganton, NC 28655 (Street Address of Principal Office) PO Box 3117 Morganton, NC 28680 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) REGISTERED AGENTS INC. Name: 3030 N. Rocky Point Drive, STE 150A Office Address: **TAMPA** 33607 __, Florida 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, and I am familiar with and accept the obligations of my position as registered agent Bill Havre/Assistant Secretary/Registered Agents Inc (Registered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Robert C. Collett, Member, PO Box 3117, Morganton, NC 28680 Francis R. Mellon, Member, PO Box 3117, Morganton, NC 28680 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 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.

Robert C. Collett

Typed or printed name of signee



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

COLLETT CRE SERVICES, LLC

is a limited liability company duly formed under the laws of the State of North Carolina, having been formed on the 15th day of January, 2016, with its period of duration being Perpetual.

I FURTHER certify that the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act; and that the said limited liability company has not filed articles of dissolution as of this date of this certificate.





Scan to verify online.

Certification# 97939308-1 Reference# 12895096- Page: 1 of 1 Verify this certificate online at http://www.sos.nc.gov/verification

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 28th day of January, 2016.

Elaine I. Marshall

Secretary of State