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COVER LETTER

TO: Registration Section

Division of Corporation	18			
SUBJECT:	Park Cre Name of I	SCENT, LLC		
The enclosed "Application by For Existence, and check are submitte	eign Limited Liability Comp d to register the above refere	any for Authorization to Tra	nsact Business in Florida," Certificate of company to transact business in Florida.	
Please return all correspondence of	concerning this matter to the	following:		
	Judith Bur	ckley		
Name of Person				
Park Crescent, LLC Firm/Company				
	Fi	rm/Company		
POBOX 501				
Address				
	<u>Lithoni</u> City/si	a GA 30058 ate and Zip Code		
		Te 6070 Gma For future annual report not		
For further information concerning	g this matter, please call:			
Judith B Name of	UCKLEY of Contact Person	at (201) 55 Area Code Day	time Telephone Number	
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	3	Division Registrati Clifton B 2661 Exe	ADDRESS: Of Corporations on Section	
Enclosed is a check for the follow \$125.00 Filing Fee	ang amount: ☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy	□ \$160.00 Filing Fee, Certificate of Status & Certified Copy	

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:
(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 "L.L.C.")
2. Nevada (Jurisdiction under the law of which foreign limited liability) 3. 81-1105518 (FEI number, if applicable)
company is organized)
4. N/A (Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability)
5. 701 N Green Valley Parkway Ste 200 Henderson NV 89074 (Street Address of Principal Office)
6. P.O. Box 50
LI thonia G17 30058
7. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)
Name: MARZSHA DROSCO
Office Address: 1229 SOUTH BEACH CIZ.
KISGIMMEE, Florida 3474(e. (City) (Zip code) 2500 2500
Registered agent's acceptance: (City) (Zip code)
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.
Manda Orosa
(Registered agent's signature)
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
T dit Dickley Managers
Part Committee Manager
Park Crescent Lie
PoBox 501, Lithonia GA 30058
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.
Typed or printed name of signee

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, BARBARA K. CEGAVSKE, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **PARK CRESCENT**, **LLC**, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since January 5, 2016, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on January 29, 2016.

Barbara K. Cegavske
BARBARA K. CEGAVSKE
Secretary of State

Electronic Certificate
Certificate Number: C20160129-2490
You may verify this electronic certificate
online at http://www.nvsos.gov/