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SECRETARY OF STATE

BRUCE

#### **COVER LETTER**

TO:		ration Section on of Corporation	ns						
SUBJE		ellator Developme	ent, LLC						
GCD9L			Name of	Limited Liability (	Company		_		
			reign Limited Liability Comp ed to register the above refere						
Please r	eturn al	l correspondence o	concerning this matter to the	following:					
		Edwin Rivera I	I						
			Na	ame of Person			-		
		Bellator Develo	opment, LLC						
			Fi	rm/Company			<b></b>		
		PO Box 291							
		<del></del>		Address			<del></del>		
		Moultrie, GA 3	1776						
		<del></del>	City/S	tate and Zip Code			_		
		edwinr@bellator	developmentllc.com						
			E-mail address: (to be used	I for future annual	report noti	fication)	_		
For furth	h <b>e</b> r info	rmation concernin	g this matter, please call:						
	Christi	na H. Rivera		229 at (	456-320	3			
		Name o	of Contact Person	Area Code	Dayt	ime Telephone Number	<u> </u>	2016	
Parkers	Division Registr P.O. B Tallaha	ing Address: on of Corporations ration Section ox 6327 assee, FL 32314			Division of Registration Clifton By 2661 Exec	cutive Center Circle ce, FL 32301		16 APR -5 D (:	
EBCIOSE		eck for the follow 5.00 Filing Fee	ing amount:  \$\Bigcup \\$130.00 \text{ Filing Fee & Certificate of Status}\$	☐ \$155.00 Filin Certified Copy	g Fee &	■ \$160.00 Filing Fee, Conf Status & Certified Co	ertificate		

# 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. Bellator Development,			
•		t include "Limited Liability Company,"	"L.L.C.," or "LLC.")
Bellator Enterprises, LLC		of transacting business in Florida. The	alternate name must include "I imited
Liability Company," "L.L.C,			aternate name that morate same
2. Georgia		3. 47-1664956	
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number,	if applicable)
4	(Date first transacted busines	s in Florida, if prior to registration.)	
	(See sections 605.0904 & 605.0	0905, F.S. to determine penalty liability	")
5	<u>, , , , , , , , , , , , , , , , , , , </u>	· · · · · · · · · · · · · · · · · · ·	
1625 Dunn Rd., Moult			
_	(Street Address of P	<u>-</u>	
6	C4 31886		<del></del>
PO Box 291, Moultrie,	GA 31776 (Mailing A	(ddreco)	
	-	·	
7. Name and street addres	ss of Florida registered agent: (P.	O. Box NOT acceptable)	
Name:	Edwin Rivera II		
Office Address:	1400 Village Square Blvd. #3-1	<del>,,</del>	
	Tallahassee	, Florida <sup>323</sup>	12-1231
Registered agent's accep	(City)	(	Zip code)
Having been named as re designated in this applica to complywith the provision	gistered agent and to accept serv tion, I hereby accept the appoint	ment as registered agent and agree	limited liability company at the place to act in this capacity. I further agree of my duties, and I am familiar with and
	- 51/2 sa-		<u> </u>
	(Registe	red agent's signature)	Pos 2
8. The name, title or capa	acity and address of the person(s)	who has/have authority to manage is	s/are:
Edwin Rivera II - Presider	nt		
PO Box 291			Side of F
Moultrie, GA 31776		,	
	of which it is organized. (If the ce		icial having custody of records in the ranslation of the certificate under oath
	Signature	of an authorized person	<del></del>
		203 (1) (b), Florida Statutes. I am a les a third degree felony as provided	
	Edwin Rivera II		
	Typed or po	rinted name of signee	

Control Number: 14084219

### 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

Bellator Development, 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 of 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

Jurisdiction Print Date Form Number : 13067599 : 08/24/2014

: Georgia :03/30/2016 :211



Brian P. Kemp Secretary of State