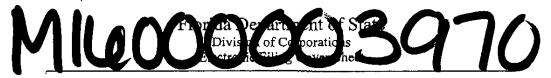
Division of Corporations

Page 1 of 1



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000122920 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : CLARK, PARTI Account Number : I20140000059

: CLARK, PARTINTON, HART, LARRY, BOND & STACKHOUSEN

Phone Fax Number : (850) 650-3304 : (850) 650-3305

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **[7]

Email Address: jen@vaden.biz

Foreign Limited Liability Company

Carbota, LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

16 MAY 18 A SECRETA TO TALLAHASSEE

H 9: 53

Electronic Filing Menu

Corporate Filing Menu

Help

J. HARRIS

FAX No. 850 650 3305

P. 002

H160001229203

COVER LETTER

TO:		ration Section n of Corporation	15					
SUBJI		rbota, LLC						
		· <u> </u>	Name of I	imited Liability C	ompany			
The en Exister	closed "A ice, and c	pplication by For heck are submitte	cign Limited Liability Comp d to register the above refere	any for Authorizat need foreign limit	tion to Tra ed liability	nsact Business in Florida," Certifi company to transact business in F	cate of lorida	
Please	return all	correspondence o	oncerning this matter to the	following:				
		Farrar J. Barker	r					
			Ne	ame of Person				
		Clark Partington						
Firm/Company								
	4100 Legendary Drive, Suite 200							
· Address								
	Destin, Florida 32541							
			City/St	tate and Zip Code				
		j en@ vaden.biz						
		<u> </u>	E-mail address: (to be used	for future annual	report not	ification)		
For fur	ther infor	mation concernin	g this matter, please call:					
Farrar J. Barker			850 at (650-33	04			
		Name o	of Contact Person	Area Code	Day	time Telephone Number		
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, PL 32301						
Enclos		eck for the follow 5.00 Filing Fee	ring amount: \$\Boxed{\subseteq} \\$130.00 \text{ Filing Fee & Certificate of Status}	■ \$155.00 Filin Certified Copy	g Fee &	☐ \$160.00 Filing Fee, Certifica of Status & Certified Copy	te	

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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0802, 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 "LLC.") 2. Tennessee (Jurisdiellon 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) 1600 Division Street, Suite 225, Nashville, Tennessee 37203 (Street Address of Principal Office) P.O. Box 22359, Nashville, Tennessee 37202 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Paul Copeland Name: 777 Hub Lane Office Address: ¢Π Santa Rosa Beach (City) 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 complywith 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: Michael Vaden - Manager 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.

Parrar J. Barker, Authorized Representative

Typed or printed name of signee



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

FARRAR BARKER

SUITE 200 4100 LEGENDARY DRIVE

DESTIN, FL 32541

Request Type: Certificate of Existence/Authorization

Request #:

0202656

Issuance Date: 05/17/2016

Copies Requested:

Document Receipt

Receipt #: 002701038

Payment-Credit Card - State Payment Center - CC #: 3673613752

Regarding:

CARBOTA, LLC

Filing Type:

Limited Liability Company - Domestic

Status:

Active

Formation/Qualification Date: 08/25/2014

Duration Term:

Perpetual

Business County: DAVIDSON COUNTY

\$20,00 Filling Fee:

\$20,00

May 17, 2016

Control #: 769244

Date Formed: 08/25/2014

Formation Locale: TENNESSEE

Inactive Date:

CERTIFICATE OF EXISTENCE

1, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

CARBOTA, LLC

- * is a Limited Llability 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

Processed By: Cert Web User

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