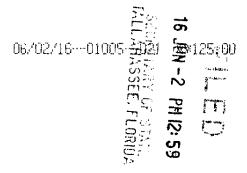
## 14600004395

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP	WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificates	of Status				
Special Instructions to Filing Officer:						
:						

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DEPARTHENT OF CLASS

JUN 0 2 2016 Y SULKER

## **COVER LETTER**

то:	Registration Section Division of Corporations					
CHEH	TBR Aquatic Owner, LLC					
SOBJ	Name of Limited Liability Company					
	closed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of ce, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.					
Please	return all correspondence concerning this matter to the following:					
	Name of Person					
	Incorporating Services, Ltd.					
	Firm/Company					
Address						
	Tallahassee, FL 32301					
	City/State and Zip Code					
	jbass@servicepartnersco.com					
For fur	E-mail address: (to be used for future annual report notification)  her information concerning this matter, please call:					
	Melissa 656-7956					
	Name of Contact Person Area Code Daytime Telephone Number					
	MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301					
Enclos	d is a check for the following amount:  \$\Boxed{\text{\text{\$\exititt{\$\text{\$\text{\$\text{\$\text{\$\}}}\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\tex					

## 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

TBR Aquatic Owner, Ll	SINESS INTHE STATE OF FLORIDA: LC			
(Name of Fore	ign Limited Liability Company; must inch	ide "Limited Liah	oility Company," "L.L.C.," or	"LLC.")
(If name unavailable, enter alt Liability Company," "L.L.C,"	ternate name adopted for the purpose of tra	ansacting business	s in Florida. The alternate nam	ne must include "Limited
2. Delaware		81-2134697		
(Jurisdiction under the law of company is organized)	of which foreign limited liability		(FEI number, if applicable)	
4				_
	(Date first transacted business in F (See sections 605.0904 & 605.0905,	lorida, if prior to F.S. to determine	registration.) penalty liability)	
5. 1575 Northside Drive,	Bldg 100, Suite 200	<u>.</u>		<del>-</del>
Atlanta, Georgia 30318				
	(Street Address of Princip	al Office)		-
6. 1575 Northside Drive, E	3ldg 100, Suite 200			_
Atlanta, Georgia 30318			•	
	(Mailing Addres	is)		-
7. Name and street address	of Florida registered agent: (P.O. Bo	x NOT accepts	able)	
Name:	Registered Agent Solutions, Inc.		_	
Office Address:	155 Office Plaza Dr., Suite A		_	I e
	Tallahassec		Florida 32301	<u> </u>
Danistan d	(City)		(Zip code)	
Registered agent's accept Having been named as reg	istered agent and to accept service of	f process for the	above stated limited liabi	lity company at the place
designated in this applicate to complywith the provision	ion, I hereby accept the appointment ons of all statutes relative to the prope	as registered ag er and complete	gent and agree to act in thi performance of my duties	s capacity, 1 Juriner agree, and I am familiar with and
accept the obligations of n	ny position as registered agent.	~~~		
	Julianne Bass	CH cr-About small-bour Cate 2016.0	ne by Authors pain.  Shee Ball, artistants Pariners Information Co., on.  Shee Copyright Copyrig	_ <u>22</u>
	(Registered ag	gent's signature)		9 9
8. The name, title or capac	city and address of the person(s) who l	has/have author	ity to manage is/are:	
Stephen Broome, Manager	r, 1575 Northside Drive, Bldg 100, Su	ite 200, Atlanta,	, Georgia 30318	
Lee Walker, Manager, 157	5 Northside Drive, Bldg 100, Suite 20	0, Atlanta, Geo	rgia 30318	<del></del>
Robert West, Manager, 15	75 Northside Drive, Bldg 100, Suite 2	00, Atlanta, Ge	orgia 30318	
9. Attached is a certificate of jurisdiction under the law of the translator must be su	of existence, no more than 90 days old of which it is organized. (If the certifical bmitted)	l, duly authentic ate is in a foreig	ated by the official having in language, a translation of	custody of records in the f the certificate under oath
	Enin R. W.) Signature of an a	elenuk authorized persor	y 1208	-
	in accordance with section 605.0203 ( the Department of State constitutes a t	1) (b), Florida S	Co Statutes. I am aware that any	

Eric R. Wilensky, Attorney-in-Fact

Typed or printed name of signee

Page 1

## Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "TBR AQUATIC OWNER, LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS

OF THE SECOND DAY OF JUNE, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TBR AQUATIC OWNER, LLC" WAS FORMED ON THE SIXTEENTH DAY OF FEBRUARY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.

Authentication: 202419241

Date: 06-02-16

5965611 8300 SR# 20164260406