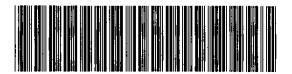
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**S Warren** SEP 0 6 2016

#### **COVER LETTER**

BJECT	Barefoot Retreat,	LLC				
bjec i	-	Name of Limited Liability Company				
					ansact Business in Florida," Ce y company to transact business	
ease retu	rn all correspondence of	concerning this matter to the	e following:			
	Beth Feeney					
	Name of Person					
	<del></del>	F	Firm/Company			
	1096 Sunset I	Rd				
Address					<u> </u>	
	Brentwood, Ti	N 37027				
	<del></del>	City/S	State and Zip Code	•		
	bethfeeney998	@gmail.com				
		E-mail address: (to be use	d for future annual	report no	tification)	
r further	information concerning	g this matter, please call:				
В	eth Feeney		615 at (	804-73 )	310	
	Name o	of Contact Person	Area Code	Day	ytime Telephone Number	
D R P.	IAILING ADDRESS: ivision of Corporations egistration Section O. Box 6327 allahassee, FL 32314			Division Registrat Clifton B 2661 Exc	r ADDRESS: of Corporations tion Section Building ecutive Center Circle see, FL 32301	
	s a check for the follow I \$125.00 Filing Fee	ring amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filid	ng Fee &	☐ \$160.00 Filing Fee, Certi of Status & Certified Copy	ficate

## 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: Barefoot Retreat, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") Barefoot Retreat II, 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.") Tennessee 81-3550740 (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) August 16, 2016 (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 1096 Sunset Rd, Brentwood TN 37027 (Street Address of Principal Office) 6. 1096 Sunset Rd, Brentwood, TN 37027 (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: \_, Florida <u>3</u>3607 TAMPA 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: Beth Feeney, Owner 1096 Sunset Rd, Brentwood, TN 37027 Bruce Feeney, Owner 1096 Sunset Rd, Brentwood, TN 37027 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.

Beth Feeney



## 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

**BETH FEENEY** 

August 26, 2016

1096 SUNSET RD

BRENTWOOD, TN 37027

Request Type: Certificate of Existence/Authorization

Issuance Date: 08/26/2016

Request #: 0212504 Copies Requested:

**Document Receipt** 

Receipt #: 002862169 Filing Fee: \$20.00

Payment-Credit Card - State Payment Center - CC #: 3681882818 \$20.00

**Barefoot Retreat, LLC** Regarding:

Filing Type: Limited Liability Company - Domestic

Control #: 861166 Formation/Qualification Date: 08/10/2016 08/10/2016 Date Formed:

Status: Active Formation Locale: TENNESSEE

**Duration Term:** Perpetual Inactive Date: Business County: WILLIAMSON COUNTY

### 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

#### **Barefoot Retreat, LLC**

- \* is a Limited Liability 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 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

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