

*Milestones*

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_

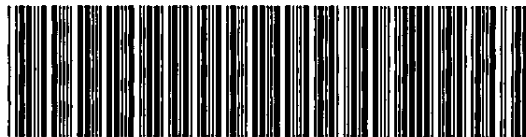
Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

*W16-57093*

*6212*

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
16 AUG 15 AM 10:12

SEP 07 2016

S. YOUNG



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 17, 2016

GREG ALEXANDER  
22 FAIRFIELD PLACE  
JACKSON, TN 38305

SUBJECT: VIP DESTIN LLC  
Ref. Number: W16000057093

2016 SEP -1 AM 11:13  
TALLAHASSEE, FLORIDA

We have received your document for VIP DESTIN LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the letters "MGRM" beside the name and address of each managing member and/or the letters "MGR" beside the name and address of each manager listed in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Shelia H Young  
Regulatory Specialist II

Letter Number: 116A00017412

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16 AUG 15 AM 10:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: VIP Destin LLC**

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, 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:

Greg Alexander

\_\_\_\_\_  
Name of Person

VIP Destin LLC

\_\_\_\_\_  
Firm/Company

22 Fairfield Pl

\_\_\_\_\_  
Address

Jackson TN 38305

\_\_\_\_\_  
City/State and Zip Code

gregalexander@eplus.net

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Greg Alexander

731

267-1031

\_\_\_\_\_  
Name of Contact Person

at ( )

Area Code

Daytime 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, FL 32301

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☒ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy

☐ \$160.00 Filing Fee, Certificate  
of Status & Certified Copy

FILED  
CLERK OF STATE  
TALLAHASSEE, FLORIDA  
16 AUG 15 AM 10:12

**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. VIP Destin LLC  
(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 3. 462682743  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 01/01/2016  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 22 Fairfield Pl  
Jackson TN 38305  
(Street Address of Principal Office)

6. 22 Fairfield Pl  
Jackson TN 38305  
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Verla Price  
Office Address: 185 B Stahlman Ave  
Destin, Florida 32541  
(City) (Zip code)

**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 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.*

Verla J. Price  
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Greg Alexander, MGRM 22 Fairfield Pl, Jackson TN 39305

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)

Greg Alexander  
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.

Greg Alexander  
Type or printed name of signee

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
16 AUG 15 AM 10:12



**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

**GREG ALEXANDER**  
22 FAIRFIELD PL  
JACKSON, TN 38305

August 12, 2016

**Request Type: Certificate of Existence/Authorization**  
Request #: 0211127

Issuance Date: 08/12/2016  
Copies Requested: 1

**Document Receipt**

Receipt #: 002842155

Filing Fee: \$20.00

Payment-Credit Card - State Payment Center - CC #: 3680832753

\$20.00

**Regarding: VIP Destin, LLC**

Filing Type: Limited Liability Company - Domestic

Formation/Qualification Date: 04/08/2013

Status: Active

Duration Term: Perpetual

Business County: MADISON COUNTY

Control #: 715380

Date Formed: 04/08/2013

Formation Locale: TENNESSEE

Inactive Date:

**CERTIFICATE OF EXISTENCE**

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

**VIP Destin, 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 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.

16 AUG 15 10:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Tre Hargett  
Secretary of State

Processed By: Cert Web User

Verification #: 018580827