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SECICLARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: ACE HAN MORKETINA 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:				
Nicole Davis Name of Person				
Ace High Marketing, UC				
3108 Piedmont Rd. NE Ste 250				
Atlanta, GA 80805 City/State and Zip Code				
nicole Dace high mar Ketting, com E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Name of Contact Person at (770) 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				
Enclosed is a check for the following amount: □ \$125.00 Filing Fee □ \$130.00 Filing Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate Certificate of Status □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate of Status & Certified Copy				

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

	ON 605.0902, FLORIDA STATUTES, THE FOLLOWING IS NESS IN THE STATE OF FLORIDA:	SUBMITTED TO REGISTER A FO	DREIGN LIMITED LIABILITY
Acottia	6 Marketina 11 C		
(Name of Foreig	h Limited Liability Company; must include "Limited Lia	ability Company," "L.L.C.," or "L	.LC.")
(If name unavailable, enter alter Liability Company," "L.L.C," o	mate name adopted for the purpose of transacting busines or "LLC.")	ess in Florida. The alternate name	must include "Limited
	which foreign limited liability	(FEI number, if applicable)	· · · · · · · · · · · · · · · · · · ·
company is organized) 4.	3-9-2016		
21/09/01	(Date first transacted business in Florida, if prior (See sections 605.0904, & 605.0905, F.S. to determine the section of the control of the	to registration.) ne penalty liability)	
5. <u>3100 PIE</u>	amor Raine Ste Z		
	(Street Address of Principal Office)		
6. <u>3105</u>	S Fledmont Rd. NE Ste	250	16
A	Hanta, GA 30305 (Mailing Address)		SEP 2
7. Name and street address	of Florida registered agent: (P.O. Box NOT accep	otable)	O AM SSEE, I
Name:	REGISTERED AGENTS INC.	_	AM II: 45 PESTATE FLORID
Office Address:	3030 N. Rocky Point Drive, STE 150A	<u>. </u>) A 5
	TAMPA (City)	, Florida 33607 (Zip code)	**
this application, I hereby a	nce: istered agent and to accept service of process for t ccept the appointment as registered agent and agr atutes relative to the proper and complete perforn on as registered agent	ree to act in this capacity. I fu	orther agree to comply familiar with and accept
-	(Registered agent's signature	2)	
8. The name, title or capace Leighton 510	ity and address of the person(s) who has/have auth Conotell, Managing Conotell, Changing	ority to manage is/are: Member	
	thonia GA 30085		
	of existence, no more than 90 days old, duly authen f which it is organized. (If the certificate is in a forepmitted)		
	Signature of an authorized pers	son	
	in accordance with section 605.0203 (1) (b), Florid	a Statutes. I am aware that any	
summitted in a document to	the Department of State constitutes a third degree for	CIONV AS DIOVIDED IOF IN S.51/.	LJJ, F.O.

Typed or printed name of signee

Control Number: 08029238

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

ACE HIGH MARKETING, 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 or notra 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
Print Date
Form Number



B: I. L.

Brian P. Kemp
Secretary of State