Florida Department of State Division of Corporations

Electronic Filing Cover Sheet

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.

(((H160002293143)))



H160002293143ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

: (850)205-8842

Phone Fax Number

: (850)878-5368

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

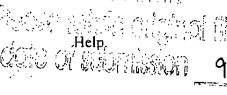
Email Address:

Forcign Limited Liability Company Nolan Transportation Group, LLC

Certificate of Status	0
Certified Copy	0
Page Count	gry
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu



9/21/2016 2:40:38 PM From: To: 8506176383(2/6)

COVER LETTER

TO: Registration Section Division of Corporations							
SUBJECT: Nolan Transportatio	n Group, LLC						
		imited Liability (Company		-		
The enclosed "Application by For Existence, and check are submitte	eign Limited Liability Comp d to register the above refere	any for Authoriza	ition to Tra ted iiability	nsuct Business in Florida, company to transact business.	" Certificate of ness in Florida		
Please return all correspondence of	oncerning this matter to the t	following:					
Scott I. Merlin							
	Na	mc of Person			-		
- 10 2-y	Fir	m/Company			-		
		• •					
3350 Riverwo	od Parkway, Suite 1600				•		
		Address					
Atlanta, GA 3	0339						
- 174	City/St	ate and Zlp Code			•		
harold.baron@rhi	nofamily com						
114 514 541 51 (5)	E-mail address: (to be used	for future annual	report noti	fication)	-		
For further information concerning	g this matter, please call:						
Name o	f Contact Person	at (Davi	time Telephone Number	-		
	r Comment Craum	7.1.00 0000	•	•			
MAILING ADDRESS: Division of Corporations			Division of	ADDRESS: of Corporations			
Registration Section		Registration Section					
P.O. Box 6327 Tallahassee, FL 32314				cutive Center Circle ce, FL 32301			
Enclosed is a check for the follow							
□ \$125.00 Filing Pee	S130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filin Certified Copy	g Fee &	☐ \$160.00 Filing Fee, C of Status & Certified Co			

9/21/2016 2:40:38 PM From: To: 8506176383(5/6)

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

IN COMPILANCE 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. Nolan Transportation C	iroup, LLC	e "Limited Liability Company," "L.L.C.," or	**************************************
Nolan Transportation		trained transfer, said party. Traine is the	L.C. 1
	ternate name adopted for the purpose of trans	sacting bosiness in Florida. The alternate name	se must include "Limited
2 Delaware (Jarisdiction under the law company is organized)	of which foreign limited liability 3.	(FEI number, if applicable)	
4. Upon Qualification			
	(Date first transacted business in Flo (See sections 605,0904 & 605,0905, F.	rida, if prior to registration.) S. to determine penalty liability)	-
5. 85 Mill Street, Bldg A,	Ste 214, Roswell , GA 30075		-
	(Street Address of Principal	Office	20
6. Same	•	•	
<u> </u>			2016 SEP 14
	(Mailing Address)		· 32 I
7. Name and street address	s of Florida registered agent: (P.O. Box		mo se
Name:	CT Comporation System		
Office Address:	3458 Lakeshore Drive		STEP STATE
Other Madess.	Tallahassee	210 stdr. 32312	
	(City)	. Florida 32312 (Zip code)	•
designated in this applica to complywith the provision	gistered agent and to accept service of p tion, I hereby accept the appointment as ous of all statutes relative to the proper (process for the above stated limited liahi s registered agent and agree to act in the and complete performance of my duties	is canacity. I further agree
accept the obligations of i	ny position as registered agent.	on System	
	By Nathan Gustin Na Obegistered ager	than Giffin, Assistant Secretary	-
S. The name, title or cans	ocity and address of the person(s) who ha		
_	up, Inc. , 85 Mill Street, Bldg A, Ste 214	· · · · · · · · · · · · · · · · · · ·	
	<u> </u>	, , , , , , , , , , , , , , , , , , , ,	
	· · · · · · · · · · · · · · · · · · ·		
 Attached is a certificate jurisdiction under the laws of the translator must be st 	of which it is organized, (If the certificate	duly anthenticated by the official having is in a foreign language, a translation of	custody of records in the The certificate under oath
		<u>/</u>	_
	Signaphe of an au	thorized person	
		(b), Florida Statutes, I am aware that any rd degree felony as provided for in s.817 laron	
	Typed or printed no		

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "NOLAN TRANSPORTATION GROUP, 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 THIRTY-FIRST DAY OF AUGUST, A.D. 2016.

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

2016 SEP 14 AM 10: 14

6121660 8300

SR# 20165605079

You may verify this certificate online at corp.delaware.gov/authver.shtml

Jantrey W. Budlock, Secretary or Boston

Authentication: 202919572

Date: 08-31-16