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COVER LETTER

TO:	Registration Section Division of Corporatio	ns						
SUBJI	ECT:	Many Madis	Son , LLC Limited Liability Company					
				nsact Business in Florida," Certificate of company to transact business in Florida.				
Please	return all correspondence	concerning this matter to the	following:					
		Heather	er Harrison ame of Person					
		Mary Mi	Mison, UC rm/Company	 				
	112 S. Broad St. Address							
		Momasulle (City/si	GA 31792 late and Zip Code					
	Y	lary ma disamou E-mail address: (to be used	tique @ Uahoo.o d for filture annual report not	fication)				
For fu	ther information concerning	ng this matter, please call:						
		Of Contact Person	at (220) 22 Area Code Day	10-2404 time Telephone Number				
	MAILING ADDRESS Division of Corporation Registration Section P.O. Box 6327 Tallahassee, FL 32314		Division of Registration B Clifton B 2661 Exe	ADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301				
Enclos	ed is a check for the follow □ \$125.00 Filing Fee	wing amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filing Fee & Certified Copy	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy				

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

IN COMPLIANCE WITH SECTOOMPANY TO TRANSACT BUS			NG IS SUBMITTEL	O TO REGIS	STER A FOREK	GN LIMITI	ED LIABILITY
1. Name of Forei	gn Limited Liability Company	; must include "Limit	ed Liability Comp	any," "L.L.	.C.," or "LLC."	")	
(If name unavailable, enter alto Liability Company," "L.L.C,"		rpose of transacting b	ousiness in Florida	. The altern	nate name mus	t include "I	Limited
2. (900r	gia	3	<u>US -</u> (FEI nur	324	0438		
(Jurisdiction under the law o company is organized)	which foreign limited liability	у	(FEI nur	nber, if app	licable)		
4	(Date first transacted by	usiness in Florida, if r	orior to registration	n.)			
5	(Date first transacted by (See sections 605.0904 &	605.0905, F.S. to del	termine penalty lia	ibility)			
	Thomas VI (Street Address	NO 6A 2	3ng 2				
6	112 S. Porpad				**	r cet	
	Thomaski Ne	6A: 31797 ling Address)	2			633 Sin	1 1
7. Name and street address	of Florida registered agent:	: (P.O. Box NOT a	acceptable)		7. A	r.)	1
Name:	Heather H	am'son	· 		7	>	m
Office Address:		man Rd.			ORIC	2: 0	•
	Tollahassee	ot	, Florida	$\frac{323}{(Zipco)}$		م '	
Registered agent's accepts Having been named as reg designated in this applicati to complywith the provision accept the obligations of m	ance: istered agent and to accept ion, I hereby accept the app ns of all statutes relative to ny position as registered age	service of process pointment as registe the proper and coi	ered agent and and an applete performa	ated limite agree to ac	ed liability co ct in this cap	acity. I fu	irther agree
8. The name, title or capac	eity and address of the perso	on(s) who has/have	authority to man	age is/are:			
Heather Ho	rrison, co-ow	nor Manager	(henil	Willifor	d Co	,Owner
	wood Dr.	. 1 - 0	á	1998	Woodh	wen	Rd.
	6A 31792			Coolid	9C, GA	300	03 31738
9. Attached is a certificate of jurisdiction under the law of the translator must be su	f which it is organized. (If t	0 days old, duly au he certificate is in a	thenticated by th	e official l	having custoc	ly of reco	rds in the
	illa	then It	Qù.				
	Sign	ature of an authorized	person				
This document is executed submitted in a document to	in accordance with section 6 the Department of State con						on
	Yeart Typec	ner Hara d or printed name of s	ignee				

Control Number: 11067463

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

MARY MADISON, 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 not a 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
From Number

:13416618 :09/07/2011 :Georgia :09/22/2016 :211



Brian P. Kemp Secretary of State