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### **COVER LETTER**

TO: Registration Section

Div	ision of Corporatio	ns				
SUBJECT:	Three Diamond Ca	pital Tampa, LLC				
	Name of Limited Liability Company					
				o Transact Business in Florida, bility company to transact busin		
Please return	all correspondence	concerning this matter to the	following:			
	Amanda Trapp	)				
Name of Person					-	
	Stibbs & Co.,	P.C.				
	Firm/Company					
	819 Crossbridg	ge Dr.			- <del>1</del>	> "I
Address					99	) 0 11
	Spring, TX 77	373			1 5 5	ガナー
City/State and Zip Code					P ITS	
atrapp@stibbsco.com					<b>်</b>	υν π <b>3</b>
	<del></del>	E-mail address: (to be use	d for future annual repor	t notification)	- <b>2</b>	
For further in	nformation concerning	ng this matter, please call:			ţ. ·	,
Amanda Trapp		281 36'	7-2222			
	Name o	of Contact Person	Area Code	Daytime Telephone Number	•	
Div Reg P.O	ision of Corporation distration Section Box 6327 lahassee, FL 32314		Divis Regi Clift 2661	EET ADDRESS: sion of Corporations stration Section on Building Executive Center Circle shassee, FL 32301		
	a check for the follow \$125.00 Filing Fee	ving amount: ☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee Certified Copy	& S160.00 Filing Fee, C of Status & Certified Co		

## 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. Three Diamond Capital	Tampa, LLC		
(Name of Fore	ign Limited Liability Company; must include "I	imited Liability Company," "L.L.C.," or "L	LC.")
(If name unavailable, enter al Liability Company," "L.L.C,	ternate name adopted for the purpose of transact	ing business in Florida. The alternate name	must include "Limited
2. Texas	3		
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)	
4	(Date first transacted business in Florida	a, if prior to registration.)	
5. 3701 10th Avenue	(See sections 605.0904 & 605.0905, F.S. t	o determine penalty hability)	
Tampa, FL 33605			→ ASE
	6 COT		
6			1 19 SS 4
	(Mailing Address)		2
7. Name and street addres	s of Florida registered agent: (P.O. Box N	OT acceptable)	S PLOS
Name:	CT Corporation Systems/Wolters Kluwer	<u> </u>	17
Office Address:	1200 South Pine Island Rd.		
	Plantation	, Florida <u>33324</u>	
Registered agent's accep	(City)	(Zip code)	
Having been named as re designated in this applica to complywith the provision	gistered agent and to accept service of pro- tion, I hereby accept the appointment as re- ons of all statutes relative to the proper and my position as registered agent.	gistered agent and agree to act in this o	capacity. I further agree
uccepi ine obligations of i	ls/ Jane Zac	chritz	
	(Registered agent's	· · ·	
8. The name, title or capa	city and address of the person(s) who has/h	ave authority to manage is/are:	
Charles Jason Herin, Man	·	ave authority to manage is also.	
	· · · · · · · · · · · · · · · · · · ·		
	·		
	of existence, no more than 90 days old, duly of which it is organized. (If the certificate is abmitted)		
	/s/ Charles Jas	on Herin	
	Signature of an author	· ··-··	
	in accordance with section 605.0203 (1) (b the Department of State constitutes a third		
	Charles Jason Herin		,
	Typed or printed name	of signer	

Corporations Section P.O.Box 13697. Austin, Texas 78711-3697



Carlos H. Cascos Secretary of State

## Office of the Secretary of State

### **Certificate of Fact**

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Three Diamond Capital Tampa, LLC (file number 802555413), a Domestic Limited Liability Company (LLC), was filed in this office on October 04, 2016.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my names officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on October 12, 2016.



Carlos H. Cascos

Secretary of State

Phone: (512) 463-5555 Prepared by: SOS-WEB Fax: (512) 463-5709 TID: 10264

Dial: 7-1-1 for Relay Services Document: 694114570011