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	MAIL				
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Certified Copies Certificates	of Status				
Special Instructions to Filing Officer:					
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Office Use Only



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		Avenue. Tallahassee, Florida 32303 ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666					
WALK IN							
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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 FOREGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

ATG KB LLC

(Name of Porcign 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. DELAWARE
3. (FEI number, if applicable)

compuny is organized) d UPON APPROVAL

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

5. 200 Ocean Lane Drive, Unit 501

Key Biscayne, FL 33149

6.	200 Ocean Lane Drive,	(Street Address of Principal Office) Unit 501			16	•
	Key Biscayne, FL 331	49			- V(3)	: :•••••
		(Mailing Address)				
7.	Name and street addres	is of Florida registered agent: (P.O. Box NOT acce	ptable)		Š.	<u></u>
	Name:	REGISTERED AGENT SOLUTIONS, INC.			\ ?	2
	Office Address:	155 Office Plaza Dr. Suite A			24	• • • • •
		Tallahassee	. Florida	32301		
		(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, $\sqrt{1}$

Secretary (Registered agent's signature)

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

Disque Dee Deane, Jr., Managing Member

200 Ocean Lane Drive, Unit 501

Key Biscayne, FL 33149

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)

Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes, 1 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.

Disque Dee Deane, Jr.

Typed or priated name of signce



The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ATG KB 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 SECOND DAY OF NOVEMBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ATG KB LLC" WAS FORMED ON THE THIRTY-FIRST DAY OF OCTOBER, A.D. 2016.

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



Jeffrey W. Budlock, See

Authentication: 203264228 Date: 11-02-16

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