

M170000001120

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

(Business Entity Name)

(Document Number)

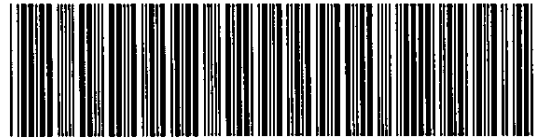
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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W17-6047 Map

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2017 FEB -6 AM 8:47



RECEIVED

2017 FEB -6 PM 4:10

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 23, 2017

TIMOTHY MARTIN  
205 ARBOR COURT  
CANTON, GA 30114

SUBJECT: LCA PROPERTIES, LLC  
Ref. Number: W17000006047

We have received your document for LCA PROPERTIES, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly  
Regulatory Specialist II

Letter Number: 217A00001376

1/31/2017 ms. Saly,  
Dear ~~Timothy Martin~~,

I have added the needed information  
to item #8 on the attached application as  
requested. Thank you for your help.

Sincerely,  
Tim Martin

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: LCA Properties, 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:

Timothy Martin

Name of Person

Firm/Company

205 Arbor Court

Address

Canton, GA 30114

City/State and Zip Code

FrontierPropertyGroup@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Timothy Martin

Name of Contact Person

at ( 770 )

Area Code

714-2530

Daytime Telephone Number

**MAILING ADDRESS:**

Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**

Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$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 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. LCA Properties, LLC  
(Name of Foreign 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. State of Georgia, USA 3. 03-0500104  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. December 3, 2016  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 205 Arbor Court  
Canton, GA 30114  
(Street Address of Principal Office)

6. PO Box 1656  
Woodstock, GA 30188  
(Mailing Address)

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CLERK OF COURT  
JUDICIAL CIRCUIT IN AND FOR  
THE COUNTY OF CLAY, FLORIDA

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Denise Kassar  
Office Address: 3333 Bartlett Blvd # 3335  
Orlando, Florida 32811  
(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.

[Signature]  
(Registered agent's signature)

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

Property Manager Denise Kassar, Property manager  
3333 Bartlett Blvd # 3335  
Orlando, FL 32811

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)

Timothy L Martin  
Signature of an authorized person

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

Timothy L. Martin  
Typed or printed name of signee

# 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

**LCA PROPERTIES, 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	: 13781983
Date Inc/Auth/Filed	: 12/10/2001
Jurisdiction	: Georgia
Print Date	: 01/09/2017
Form Number	: 211



*B. P. Kemp*

Brian P. Kemp  
Secretary of State