1117000003361

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL.
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		·
,		

Office Use Only



100297676791

04/18/17--01020--020 **125.00

2017 APR 18 PH 12 23
SECRETARY OF STATE
TALLAHASSEF, FI TOBIE,

K. SALY APR 2 0 2017

COVER LETTER

TO:

Registration Section

Division of Corpora	tions			
Ag Barn Manage SUBJECT:	ement, LLC			
	Name of	Limited Liability Company		
The enclosed "Application by Existence, and check are subm	Foreign Limited Liability Compitted to register the above refere	nany for Authorization to Transced foreign limited liability	ansact Business in Florida," Certificate of y company to transact business in Florida	
Please return all corresponden	ce concerning this matter to the	following:		
Trent Gibso	n			
.	N	ame of Person		
Ag Bam Ma	inagement, LLC			
	Fi	rm/Company		
112 N 12th	Street Suite B			
 		Address		
Миттау, КҮ	42071			
	City/S	tate and Zip Code		
info@purcha	se-Ilc.com			
	E-mail address: (to be use	d for future annual report no	tification)	
For further information concer	rning this matter, please call:			
Emily Giddens		731 642-17 at ()	55	
Nan	ne of Contact Person	Area Code Day	ytime Telephone Number	
MAILING ADDRESS: STREET ADDRESS:				
Division of Corporat Registration Section	ions	Division of Corporations Registration Section		
P.O. Box 6327		Clifton Building		
Tallahassee, FL 3231	4	2661 Ex	ecutive Center Circle see, FL 32301	
Enclosed is a check for the fol	llowing amount:			
■ \$125.00 Filing Fed		□ \$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:

Ag Bam Management, I	LLC				
(Name of Fore	ign Limited Liability	Company, must include "	Limited Liability Compan	y," "L.L.C.," or	·LLC.")
(If name unavailable, enter all Liability Company," "L.L.C.		for the purpose of transac	ting business in Florida. T	The alternate nam	e must include "Limited
2. Kentucky	<i></i> 220. 7	3. 81	-3998468		
(Jurisdiction under the law company is organized)	of which foreign limit	ted liability	(FEI numb	er, if applicable)	
4. February 1, 2017					_
	(Date first tra (See sections 60	ansacted business in Floric 05.0904 & 605.0905, F.S.	la, if prior to registration.) to determine penalty liabi	lity)	
5. 112 N 12th Street Suite	e В				5.0 2
Murray, KY 42071				٠.	夏五
6. 112 N 12th Street Suite		eet Address of Principal O	ffice)		FILED PHE 23 MINER 18 PHE 23 SECRETARY OF STATE FALLARIASSEE, FLORIO,
Murray, KY 42071					元 圣 口
		(Mailing Address)			STA STA
7. Name and street addres	s of Florida register	red agent: (P.O. Box N	NOT acceptable)		REFERENCE SERVICE
Name:	Kenneth Harris		• ,		72
	1040 Hwy 98 Eas				
Office Address:					
	Destin	(0:-)	, Florida 3	2541	•
Registered agent's accept	tance:	(City)		(Zip code)	
	tion, I hereby accep ons of all statutes r	pt the appointment as r elative to the proper an	egistered agent and ag	ree to act in thi	lity company at the place is capacity. I further agree , and I am familiar with and
		(Registered agent)	's signature)		-
8. The name, title or capa	ecity and address of	the person(s) who has/l	have authority to manag	e is/are:	
Micahel Harris, Principal		Trent Gibs	on, Manager		
Doughty Enterprises, LLC	C, Principal				
That's ARAP Investments.	, Inc., Principal				
9. Attached is a certificate jurisdiction under the law of the translator must be su	of which it is organ:	ized. (If the certificate i		a translation of	the certificate under oath
		organizate or all accum	orized person		
This document is executed submitted in a document to		State constitutes a third	degree felony as provid		
		Trent Gi	bson		

Typed or printed name of signee

FILED
2017 APR 18 PM 12 23
FALLAHASSEE FIATE

Commonwealth of Kentucky Alison Lundergan Grimes, Secretary of State $\mathcal{A}_{LLAHAS}^{SECRETA}$

Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

Certificate of Existence

Authentication number: 187614

Visit https://app.sos.ky.gov/ftshow/certyalidate.aspx to authenticate this certificate.

I, Alison Lundergan Grimes, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

AG BARN MANAGEMENT, LLC

is a limited liability company duly organized and existing under KRS Chapter 14A and KRS Chapter 275, whose date of organization is September 27, 2016 and whose period of duration is perpetual.

I further certify that all fees and penalties owed to the Secretary of State have been paid; that articles of dissolution have not been filed; and that the most recent annual report required by KRS 14A.6-010 has been delivered to the Secretary of State.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal at Frankfort, Kentucky, this 24th day of March, 2017, in the 225th year of the Commonwealth.



Mison Lundergan Grimes

Alison Lundergan Grimes

Secretary of State

Commonwealth of Kentucky

187614/0963936