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| (Requestor | s Name) |
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| (Address) | |
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| (City/State/2 | Zip/Phone #) |
| PICK-UP | WAIT MAIL |
| (Business E | Entity Name) |
| (Document | Number) |
| Certified Copies C | ertificates of Status |
| Special Instructions to Filing Of | fficer: |
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Office Use Only



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M. MILLIGAN

COVER LETTER

Registration Section Division of Corporations

TO:

| SUBJECT: TWG Overseas, 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: | |
| Don Bryant Name of Person | |
| Name of Person | |
| Songy Highroads, LLC Firm/Company | |
| Firm/Company | |
| 6 Concourse Parking Scrite 925 | |
| , | |
| Attenta, GA 30004 30328 City/State and Zip Code | |
| City/State and Zip Code | |
| E-mail address to be used for future annual report notification) | |
| For further information concerning this matter, please call: | |
| Don Bryant at (404) 995-8161 Name of Contact Person Area Code Daytime Telephone Number | |
| | |
| MAILING ADDRESS: STREET ADDRESS: Division of Corporations Division of Corporations | |
| Registration Section Registration Section P.O. Box 6327 Clifton Building | |
| Tallahassee, FL 32314 2661 Executive Center Circle | |
| Tallahassee, FL 32301 | |
| Enclosed is a check for the following amount: \$\Begin{array}{c} \Begin{array}{c} \\$125.00 \text{ Filing Fee} \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | |
| ,, | |

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS

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: TWG Overseas, 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.") (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) C T Corporation System Name: 1200 South Pine Island Road Office Address: Plantation Florida (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. (Registered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Title or Capacity: Name and Address: Name and Address: Title or Capacity: (Use attachments if necessary)

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

10. 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.

Typed or printed name of signee

<u>Delaware</u>

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "TWG OVERSEAS, 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 TWENTY-SIXTH DAY OF APRIL, A.D. 2017.

MIL NAY -2 AM 9: 22

Authentication: 202442328

Date: 04-26-17

6330512 8300 SR# 20172820536

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