M17000004599

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		,

Office Use Only



800299414348

05/30/17--01003--017 **155.00

2017 MAY 26 PM 1: 00

MN 3 1 2MT RIS

COVER LETTER

TO: Registration Section · Division of Corporations

Surrect: South Oak Title 30A, 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:

Marcus L. Hur	nt
	Name of Person
South Oak Tit	le 30A, LLC
	Firm/Company
2870 Old Roc	ky Ridge Road, Suite 160
	Address
Birmingham A	L 35243
	City/State and Zip Code
huck@chuckt	ucker.com
E-mail addres	s: (to be used for future annual report notification)

For further information concerning this matter, please call:

\sim 1		_	
r'r	いいへん		レヘr
\cup	IUUN	Tuc	VCI.

, 850

960-9605

Name of Contact Person

Area Code

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:

	oreign Linnea	Liability Company; must include "Lii	mited Liabilit	Company," "L.L.C.," or "LLC	.")		
	ernate name adop	sted for the purpose of transacting business in	a Florida The a	ternate name must include "Limited !	.ability Coi	mpany," "L.L.C," or "	LLC ")
_{2.} Alabama			3.				
(Jurisdiction under the la	iw of which force	gn limited liability company is organized)		(FEL m	unber, if app	ilicable)	
4. June 1, 2017							
	(Da (Se	ate first transacted business in Florida, if prices sections 605,0904 & 605,0905, F.S. to del	or to registration termine penalty) liability)		→ №	
_{5.} 5235 E. County	y Highway	30A, Suite 3	6.	2870 Old Rocky Ridg		, Stalle 16	
(Street Add Santa Rosa Be	ress of Principal ((Mailing A Birmingham AL 35243	-	2部	PER
Santa Nosa De	acii FL JZ	409		Birmingham AL 33243	,	126 1488	-
·		<u> </u>				Fri -	
7 Name and street a	dduses of Fl	anida maniatanad avante (D.O. E	NOT a	accutable)			8 1 3 5
7. Name and <u>street a</u>		orida registered agent: (P.O. E	SOX INOT 2	(cceptable)		STATE LORID	المرين
Name:	Cha	rles G. Tucker					
Office Add	ress: 5235	5 E. County Highway 30A,	Suite 3			عت	
	San	ta Rosa Beach		, Florida 32459			
		(City)		, riorida(Zip o	ode)		
8. The name, title o	r capacity ar	(Registered age		authority to manage is/are			
8. The name, title o Title or Capaci		(Registered age and address of the person(s) who Name and Address:	has/have	nuthority to manage is/are tle or Capacity:		me and Addres	ss:
	ty:	nd address of the person(s) who	has/have			me and Addres	ss:
Title or Capaci	ty:	nd address of the person(s) who Name and Address: Marcus L. Hunt 2870 Old Rocky Ridge Road. Suite 160	has/have			me and Addres	:s:
Title or Capaci	ty:	nd address of the person(s) who Name and Address: Marcus L. Hunt	has/have			me and Addres	::
Title or Capaci	ty:	nd address of the person(s) who Name and Address: Marcus L. Hunt 2870 Old Rocky Ridge Road. Suite 160	has/have			me and Addres	:s:
Title or Capaci	ty:	nd address of the person(s) who Name and Address: Marcus L. Hunt 2870 Old Rocky Ridge Road. Suite 160	has/have			me and Addres	<u>ss:</u>
Title or Capaci Manager/Men	t <u>y:</u> nber	nd address of the person(s) who Name and Address: Marcus L. Hunt 2870 Old Rocky Ridge Road. Suite 160	has/have			me and Addres	: <u>s:</u>
Title or Capaci Manager/Men (Use attachments if 9. Attached is a certi jurisdiction under the	nber necessary) ficate of exists a law of which	nd address of the person(s) who Name and Address: Marcus L. Hunt 2870 Old Rocky Ridge Road. Suite 160 Birmingham AL 35243 stence, no more than 90 days och it is organized. (If the certifi	has/have a	tle or Capacity:	Nau	custody of recor	ds in the
Title or Capaci Manager/Men (Use attachments if 9. Attached is a certi jurisdiction under the	nber necessary) ficate of exists a law of which	Marcus L. Hunt 2870 Old Rocky Ridge Road. Suite 160 Birmingham AL 35243 stence, no more than 90 days o ch it is organized. (If the certified)	Id, duly auticate is in a	tle or Capacity: henticated by the official foreign language, a transl	Nau	custody of recor	ds in the
Title or Capaci Manager/Men (Use attachments if	nber necessary) ficate of exists a law of which	Marcus L. Hunt 2870 Old Rocky Ridge Road. Suite 160 Birmingham AL 35243 stence, no more than 90 days o ch it is organized. (If the certified)	has/have a	tle or Capacity: henticated by the official foreign language, a transl	Nau	custody of recor	ds in the
Title or Capaci Manager/Men (Use attachments if 9. Attached is a certi jurisdiction under the of the translator must	nber necessary) ficate of exise law of whice the submitted	Marcus L. Hunt 2870 Old Rocky Ridge Road. Suite 160 Birmingham AL 35243 stence, no more than 90 days o ch it is organized. (If the certified)	Id, duly autocate is in a	henticated by the official foreign language, a transl	having c	custody of recorthe certificate u	ds in the

Typed or printed name of signce

John H. Merrill Secretary of State P.O. Box 5616 Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that South Oak Title 30A, L.L.C. was formed in Shelby County, Alabama on May 17, 2017. The Alabama Entity Identification number for this entity is 391-908. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



20170525000019102

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

05/25/2017

Date

J. H. Merill

John H. Merrill

Secretary of State

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:

	name adopted for the purpose of trans		Contraction of the contraction of		al Linksky, Con		° 91.1.6
dabama	name adopted for the purpose of trans	sacting dusiness in 14		-1583980	га глаонку с оп	зрану, такас,	01 132
	high foreign limited hability company	y is organized)	3. 02		jumber, if app	licable)	
June 1, 2017					•		
Julie 1, 2017	(Date first transacted business	s in Florida, if prior te	registration)				
5235 E. County Hig	(See sections 605,0904 & 605	5,0905, F.S. to detem		າ 70 Old Rocky Rid	lae Road	Suite 160	1
(Street Address of	Principal Office)			(Marling	g Address)	Ounc 100	
Santa Rosa Beach	FL 32459	_	Birr	mingham AL 352	43		
		_				<u> </u>	2
							=
Name and street address	ss of Florida registered ag	gent: (P.O. Box	x <u>NOT</u> accep	table)			HAY
Name:	Charles G. Tucker	·				SSI	26
Office Address:	5235 E. County High	nway 30A, St	uite 3			HO.	P
omee radiess.	Santa Rosa Beach			— , Florida <u>32459</u>	1	STA)	
	Santa Nosa Deach			Florida 02408	,	20 >	**
ving been named as re ignated in this applica comply with the provisi		appointment a se to the proper cred agent.	ns registered r and comple	(2) the above stated lim agent and agree to	p code) nited liabilin act in this	F [™] ty company capacity.	I furth
iving been named as resignated in this applica comply with the provised d accept the obligation	tance: gistered agent and to acc tion, I hereby accept the ions of all statutes relatives of my position as regist	cept service of appointment as to the proper certal agent. (Registered agent's	ns registered or and comple	(2) the above stated lim agent and agree to te performance of	p code) iited liabilii act in this my duties,	F [™] ty company capacity.	e at the I furth
iving been named as resignated in this applica comply with the provised d accept the obligation	tance: gistered agent and to acc tion, I hereby accept the ons of all statutes relativ	cept service of appointment are to the proper cered agent. (Regulered agent's erson(s) who have	as registered r and comple signature) as/have author	(2) the above stated lim agent and agree to te performance of	p code) iited liabilii act in this my duties,	F [™] ty company capacity.	v at the I furth amilia
iving been named as resignated in this applica comply with the provise d accept the obligation. The name, title or capa	tance: gistered agent and to acc tion, I hereby accept the ions of all statutes relative s of my position as register acity and address of the pe	cept service of appointment as to the proper ered agent. (Regidered agent's erson(s) who hadress:	as registered r and comple signature) as/have author	(Zi the above stated lim agent and agree to te performance of prity to manage is/a	p code) iited liabilii act in this my duties,	Ori ty company capacity. and I am f	v at the I furth amilia
wing been named as resignated in this application of the provised accept the obligation. The name, title or capa	tance: gistered agent and to acc tion, I hereby accept the tons of all statutes relative to f my position as region the second address of the pe Name and Ad Marcus L. Hu 2870 Old Rocky Ridge R	cept service of appointment are to the proper fered agent. (Regulered agent's erson(s) who haldress:	as registered r and comple signature) as/have author	(Zi the above stated lim agent and agree to te performance of prity to manage is/a	p code) iited liabilii act in this my duties,	Ori ty company capacity. and I am f	v at the I furth amilia
ving been named as reignated in this application this application of accept the obligation. The name, title or capa	tance: gistered agent and to acc tion, I hereby accept the tons of all statutes relative s of my position as region acity and address of the pe Name and Ad Marcus L. Hu	cept service of appointment are to the proper fered agent. (Regulered agent's erson(s) who haldress:	as registered r and comple signature) as/have author	(Zi the above stated lim agent and agree to te performance of prity to manage is/a	p code) iited liabilii act in this my duties,	Ori ty company capacity. and I am f	v at the I furth amilia
ving been named as reignated in this applicationally with the provised accept the obligation. The name, title or capa	tance: gistered agent and to acc tion, I hereby accept the tons of all statutes relative to f my position as region the second address of the pe Name and Ad Marcus L. Hu 2870 Old Rocky Ridge R	cept service of appointment are to the proper fered agent. (Regulered agent's erson(s) who haldress:	as registered r and comple signature) as/have author	(Zi the above stated lim agent and agree to te performance of prity to manage is/a	p code) iited liabilii act in this my duties,	Ori ty company capacity. and I am f	v at the I furth amilia
ving been named as resignated in this applicationally with the provised accept the obligation. The name, title or capa	tance: gistered agent and to acc tion, I hereby accept the tons of all statutes relative to f my position as region the second address of the pe Name and Ad Marcus L. Hu 2870 Old Rocky Ridge R	cept service of appointment are to the proper fered agent. (Regulered agent's erson(s) who haldress:	as registered r and comple signature) as/have author	(Zi the above stated lim agent and agree to te performance of prity to manage is/a	p code) iited liabilii act in this my duties,	Ori ty company capacity. and I am f	v at the I furth amilia
ving been named as reignated in this application this application of the obligation. I accept the obligation of the name, title or capatite or Capacity: Manager/Member	tance: gistered agent and to acc tion, I hereby accept the tons of all statutes relative to fmy position/as egist acity and address of the pe Name and Ad Marcus L. Hu 2870 Old Rocky Ridge R Birmingham AL 35243	cept service of appointment are to the proper fered agent. (Regulered agent's erson(s) who haldress:	as registered r and comple signature) as/have author	(Zi the above stated lim agent and agree to te performance of prity to manage is/a	p code) iited liabilii act in this my duties,	Ori ty company capacity. and I am f	v at the I furth amilia
signated in this applicated comply with the provision of accept the obligation. The name, title or capatitle or Capacity: Manager/Member Use attachments if necessaticated is a certificate	gistered agent and to accept the tions of all statutes relatives of my position/as egistered address of the pename and	cept service of appointment are to the proper ered agent. (Regidered agent's erson(s) who hadress: unt Road, Suite 160	as registered r and comple signature) as/have author Title o	he above stated limagent and agree to the performance of ority to manage is/arr Capacity:	p code) iited liabilit act in this my duties. re: Nan	ty company capacity. and I am f	r at the I furth amilia Iress:
rying been named as resignated in this applicated in this applicate comply with the provision of accept the obligation. The name, title or capatite or Capacity: Manager/Member Attached is a certificate is diction under the law	gistered agent and to accept the tions of all statutes relatives of my position/as egistered address of the pename and	cept service of appointment are to the proper ferth agent. (Registered agent's erson(s) who haldress: ant Road, Suite 160	as registered r and comple signature) as/have author Title o	the above stated limagent and agree to the performance of the performance of the performance of the performance of the performance is/agriculty:	p code) iited liabilit act in this my duties. re: Nan	ty company capacity. and I am f	r at the I furth amilia Iress:

Typed or printed name of signee

John H. Merrill Secretary of State

P.O. Box 5616 Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that South Oak Title 30A, L.L.C. was formed in Shelby County, Alabama on May 17, 2017. The Alabama Entity Identification number for this entity is 391-908. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



20170525000019102

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

05/25/2017

Date

X. M. Menill

John H. Merrill

Secretary of State