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| Certified Copies | | |
| Special Instructions to | o Filing Officer: | |
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Office Use Only



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COVER LETTER

| TO: | Registration Section |
|-----|--------------------------|
| | Division of Corporations |

Surgert. B & H Forestry Services, 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:

For further information concerning this matter, please call:

Jordan Roberts

.,229

242-7562

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

Control Number: 17040906

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

B & H FORESTRY SERVICES, 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 Date Inc/Auth/Filed Jurisdiction

Print Date
Form Number

: 14686427 : 04/17/2017

: Georgia : 05/30/2017





Brian P. Kemp 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 of Foreign | Limited Liability Company; must include "Limited | Liabili | ty Company. | ." "L.L.C.," or "LLC | ::") ⁻ | | | |
|--|---|--------------------|--------------------------|---|---------------------------|---------------------------|----------------|------------------------|
| name unavailable, enter alternate r | name adopted for the purpose of transacting business in Flor | ida. The a | alternate name | must include "Limited | Liability | Company," | "L.L.C," | or "LLC.") |
| Georgia | | 3. | | | | | | |
| | hich foreign limited liability company is organized) | . د | • | (FEI n | iumber, if | applicable) | | |
| Upon registration | | | | | | | | |
| | (Date first transacted business in Florida, if prior to r (See sections 605 0904 & 605 0905, F.S. to determin | egistration | n.) ; liability) | | • | | | |
| 517 Inlet Harbour | | 6. | 517 Inle | et Harbour | | | | |
| (Street Address of | Principal Office) | | ·· | (Mailing / | Address) | | | |
| Douglas, GA 31535 | <u> </u> | | Dougla | s, GA 31535 | | | | |
| | | | | | | ., - | | |
| Name and street address | ss of Florida registered agent: (P.O. Box | <u>NOT</u> | acceptable | e) | | WIIW MOJE | 17 Hš | , |
| Name: | C T Corporation System | | | | | S | چَرَ دے | چيوند نه |
| Office Address: | 1200 South Pine Island Road | | | | | RY O | | erina Propositi |
| | Plantation | | | Florida 33324 | | | -165 | ĝ. |
| | (City) | | , | /7in | code) | | ອນ -:- | المريزة |
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| signated in this applica comply with the provis | ition, I hereby accept the appointment as ions of all statutes relative to the proper is of my position as registered agent. | regist and co | tered agen omplete po | it and agree to a | ict in t | his capa | icity. | I further |
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C. Wayne Hester, DMD



Erin DeGennaro edegennaro@balch.com Direct Line: (904) 348-6874 Fax: (904) 396-9001

May 30, 2017

VIA FEDERAL EXPRESS

Division of Corporations Registration Section 2261 Executive Center Circle Tallahassee, FL 32301

Re: Registration of Foreign LLC - SAI SUMUKH LLC

To Whom It May Concern:

Please find enclosed the signed form for the registration of the above entity along with a check in the amount of \$130.00 for the filing fee and certificate of status along with a Georgia Good Standing Certificate.

Please contact me with any questions or if you should need any additional information.

Sincerely yours,

Erin DeGennaro Legal Assistant

/ed Encl.