

MI70000005126

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. SCOTT

JUN 16 2017

DOUGLAS G. BROWN
DOUGLAS G. BROWN LAW FIRM
16 Wellington Avenue
Greenville, South Carolina 29609
864-672-4689
Email: dbrown@dgbrownlawfirm.com

June 8, 2017

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

Re: Submission of Application by Foreign Limited Liability Company for Authorization to
Transact Business in Florida.
Entity Name: NLR-BB, LLC, an Alabama limited liability company

Dear Sir/Madam:

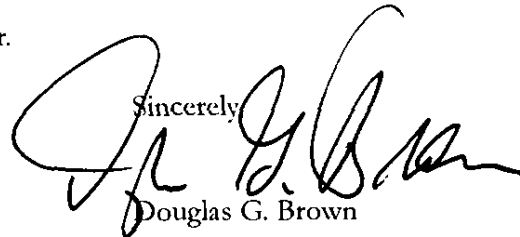
Enclosed please find the following documents required when applying for an Authorization to
Transact Business in Florida:

1. Cover letter with Check in the amount of \$125.00 attached as filing fee;
2. Application; and
3. Original Certificate of Existence from State of Alabama.

I have enclosed a return, self-addressed, stamped envelope for your convenience when returning the
filed and recorded Application for Authorization to Transact Business in Florida.

Thank you for your prompt attention to this matter.

Sincerely,


Douglas G. Brown

DGB/swr
Encs: Check (\$125.00)
Above listed documents (3)
SASE

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NLR-BB, 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:

Douglas G. Brown, Attorney at Law
Name of Person

Douglas G. Brown Law Firm
Firm/Company

16 Wellington Avenue
Address

Greenville, SC 29609
City/State and Zip Code

srobinson@dgbrownlawfirm.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

S. Robinson at (864) 672-4675
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

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TALLAHASSEE, FLORIDA

Enclosed is a check for the following amount:

- | | | | |
|----------------------------------------------|-------------------------------------------------------------------------|------------------------------------------------------------------|-----------------------------------------------------------------------------------------|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy | <input type="checkbox"/> \$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. NLR-BB, 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. Alabama 3. 47-2463368
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

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

5. 368 Osceola Avenue 6. 368 Osceola Avenue
(Street Address of Principal Office) (Mailing Address)
Jacksonville Beach, FL 32250 Jacksonville Beach, FL 32250

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

Name: NATHAN FABRICK

Office Address: 368 Osceola Avenue
Jacksonville Beach, Florida 32250
(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.

Nathan Fabrick
(Registered agent's signature)

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

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>
<u>Manager</u>	<u>Jason Walter</u> <u>National Land Realty, LLC</u> <u>1212 Haywood Road</u> <u>Greenville, SC 29615</u>	

Name and Address:

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TALLAHASSEE FLORIDA

(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]
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.

Susan Floyd
Typed or printed name of signer

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 NLR-BB, LLC was formed in Tuscaloosa County, Alabama on December 5, 2014. The Alabama Entity Identification number for this entity is 323-651. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.

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TALLAHASSEE, FLORIDA



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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. Merrill

John H. Merrill

Secretary of State