# M17000005613

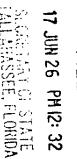
(Re	equestor's Name)				
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PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
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Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer:					





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S. WARREN 'JUL 0 3 2017

## COVER LETTER

TO:

Registration Section

Division of Corporations					
SUBJECT: AdKins 7	The 22, LLC	Limited Liability Company			
The enclosed "Application by Foreig Existence, and check are submitted	gn Limited Liability Comp to register the above refere	pany for Authorization to Tra enced foreign limited liability	ansact Business in Florida," Certificate of y company to transact business in Florida.		
Please return all correspondence cor	neerning this matter to the	following:			
	Michae	Ackins ame of Person			
AdKins Tite 22, LLC Firm/Company					
5826 Allison Ln Ba					
<del></del> 1	Actions The used	Park, GA tate and Zip Code  Tile 22 Lah d for future annual report not	00. Com		
For further information concerning t			····		
Michael Name of C	ArlKing Contact Person	at ( <u>386</u> ) <u>59</u> Area Code Day	70 - 0122 time Telephone Number		
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		STREET Division Registrati Clifton B 2661 Exe	ADDRESS: of Corporations ion Section		
	g amount:  \$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

companytotransactbi 1. AdKin's Tila	TION 605.0902, FLORIDA STATUTES, THE I SINESS IN THE STATE OF FLORIDA: Limited Liability Company; must include "Limi		
(If name unavailable, enter alternate n	ame adopted for the purpose of transacting business in F	forida. The alternate name must include "Limited Lia".	
5. 5826 All Street Address of Lake Pay 31636	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905, FS to determine to the first of	o registration) nine penalty liability)  6. 5826 All (Mailing Add Lake Park 31636	
Name:	s of Florida registered agent: (P.O. Bo <u>Donna Johns</u> <u>9028 E Gospel ISLA</u> /nuerness		426 PHIZ: 32
designated in this applica to comply with the provisi	(City)	process for the above stated limited as registered agent and agree to act r and complete performance of my	e)   liability company at the place   in this capacity. I further agre
8. The name, title or capacity:  Dwner	Michael Adking  Sale Allison  Late Park  Misten Adking  Sale Allison  Late Park  Sale Allison	nas/have authority to manage is/are:  Title or Capacity:	Name and Address:
(Use attachments if necess 9. Attached is a certificate jurisdiction under the law- of the translator must be si	of existence, no more than 90 days old of which it is organized. (If the certification of the	duly authenticated by the official hate is in a foreign language, a translat	aving custody of records in the ion of the certificate under oath
	other Department of State constitutes as a Signature Michael Signature State Constitutes as a Signature Signature Signature State Constitutes as a signature state of State Constitute state of State Constitutes as a signature state of State Constitute state of State Constitutes as a signature state of State Constitute state of State Constitutes as a signature state of State Constitute state of State Constitutes as a signature state of State Constitute state of State Consti		

Control Number: 17052126

# 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

#### AdkinsTile22, 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

Print Date Form Number :14716861 :05/08/2017

: Georgia : 06/19/2017

:211



B: P. Kemp Secretary of State