

# M17000006676

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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**To:**

Division of Corporations  
Fax Number : (850)617-6383

**From:**

Account Name : TRIAD PROFESSIONAL SERVICES  
Account Number : 120160000008  
Phone : (850)777-2091  
Fax Number : (770)220-1943

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**Foreign Limited Liability Company  
PHOENIX INVESTMENT PARTNERS II, LLC**

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

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2017 AUG -4 PM 4:28

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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

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K. SALY

AUG -7 2017

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Phoenix Investment Partners II, 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:

Lorna J. Virts

\_\_\_\_\_  
Name of Person

Smith, Gambrell & Russell, LLP

\_\_\_\_\_  
Firm/Company

1230 Peachtree Street NE, Suite 3100

\_\_\_\_\_  
Address

Atlanta, GA 30309

\_\_\_\_\_  
City/State and Zip Code

LWvirtz@sgriaw.com

\_\_\_\_\_  
E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

Lorna J. Virts

404

815-3500

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
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  
Clifford 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

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# APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.09(2), FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Phoenix Investment Partners II, 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. Georgia 3. \_\_\_\_\_  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

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

5. 2451 Cumberland Parkway, Suite 3556  
(Street Address of Principal Office)  
Atlanta, GA 30339

6. 2451 Cumberland Parkway, Suite 3556  
(Mailing Address)  
Atlanta, GA 30339

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

Name: Smith, Gambrell & Russell, LLP

Office Address: 50 North Laura Street, Suite 2600

Jacksonville, Florida 32202  
(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.

Laura L. Waitner, Partner

(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:	Title or Capacity:	Name and Address:
Manager	Paul V. Troup 2451 Cumberland Pkwy Ste 3556 Atlanta, GA 30339		

(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)

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.

Laura L. Waitner

Signature of an authorized person

Laura L. Waitner, Authorized Person

Type / or printed name of signer

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Control Number : 17079338

**STATE OF GEORGIA**  
**Secretary of State**  
Corporations Division  
313 West Tower  
2 Martin Luther King, Jr. Dr.  
Atlanta, Georgia 30334-1530

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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

**Phoenix Investment Partners II, 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 : 14781131  
Date Inc/Auth/Filed : 07/17/2017  
Jurisdiction : Georgia  
Print Date : 08/04/2017  
Form Number : 211



*B. P. Kemp*

Brian P. Kemp  
Secretary of State

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