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17 SEP 18 PH 2: ST SECRETARY OF STATE

S. WARREN SEP 1 9 2017

COVER LETTER

TO:		istration Section sion of Corporation	ons .			t.		
SUBJE		CCF Partners, LLC						
50	,	<u> </u>	Name of	Limited Liability	Company			
The end Existen	closed ice, an	"Application by Fod check are submitted."	reign Limited Liability Com ed to register the above refer	pany for Authorization	ation to Tr ited liabilit	ansact Business in Florida," Co y company to transact business	ertificate of s in Florida.	
Please	return	all correspondence	concerning this matter to the	following:				
		Tracy Fleenor						
			N	lame of Person				
		CCF Partners,	LLC					
			F	irm/Company		_		
		2304 Silverdale Drive, Suite 200						
			•	Address				
		Johnson City, TN 37601						
			City/S	State and Zip Code	:			
		gwiggins@mitc	heox.com					
			E-mail address: (to be use	d for future annua	l report no	tification)		
For fur	ther in	formation concerning	ng this matter, please call:	1				
Tracy Fleenor			31 (⁴²³	282-65	82			
		Name (of Contact Person	Area Code	Day	rtime Telephone Number		
	Divi: Regi P.O.	ILING ADDRESS sion of Corporation stration Section Box 6327 thassee, FL 32314		I	Division Registrat Clifton B 2661 Exc	of Corporations ion Section Building ecutive Center Circle see, FL 32301		
Enclose		check for the follow 125,00 Filing Fee	ving amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filio Certified Copy	ng Fee &	■ \$160.00 Filing Fee, Certing of Status & Certified Copy	ficate	

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:

(Limited Liability Company: must include "I	imited Liability Company," "L.L.C.," or "LLC	2.")			
Comfort Inn Lakeland, L			•			
		in Florida. The alternate name must include "Limited	Liability Company," "L.L.C," or "LLC.")			
2. Tennessee		3. 82-2408369				
(Jurisdiction under the law of w	hich foreign limited liability company is organized)		(FEI number, if applicable)			
4	(Date first transacted business in Florida, if pr (See sections 605 0904 & 605,0905, F.S. to di	nor to registration,)				
5. 2304 Silverdale Drive. (Street Address of I		6. Same as Principal Office				
Johnson City, TN 376		(Mading A	vadiess)			
Johnson City, 111 570						
-	·					
7 N	and the state of t	D. MOT	<i>5</i> €			
7. Name and <u>street addres</u>	ss of Florida registered agent: (P.O.	Box NOT acceptable)	FG 7s			
Name:	Philip Cox					
0.00	4125Clarcona Ocoee Road		888 84 - E			
Office Address:	7725Clareona George Rolls		夏 草			
	Orlando	, Florida 32810				
1 3	(City)	(Zip	code) S			
Registered agent's accep						
		of process for the above stated limit				
		nt as registered agent and agree to a oper and complete performance of n				
	s of my position as registered agent.		ij unites, una i am jumum san			
		T.				
	(Registered ag	ent's signature)				
8. The name, title or capa	acity and address of the person(s) wh	io has/have authority to manage is/are	;;			
Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:			
Member	Tracy Fleenor	Member	Philip Cox			
	PO Box 3891		PO Box 3891			
			10 000 3091			
	Johnson City, TN 37602		Johnson City, TN 37602			
	Johnson City, TN 37602		Johnson City, TN 37602			
Member	Johnson City, TN 37602 JM Cox Jr		Johnson City, TN 37602			
Member	Johnson City, TN 37602 JM Cox Jr PO Box 3891		Johnson City, TN 37602			
Member	Johnson City, TN 37602 JM Cox Jr		Johnson City, TN 37602			
Member (Use attachments if neces	Johnson City, TN 37602 JM Cox Jr PO Box 3891 Johnson City, TN 37602		Johnson City, TN 37602			
(Use attachments if neces	Johnson City, TN 37602 JM Cox Jr PO Box 3891 Johnson City, TN 37602 sary)		Johnson City, TN 37602			
(Use attachments if neces 9. Attached is a certificate	Johnson City, TN 37602 JM Cox Jr PO Box 3891 Johnson City, TN 37602 sary) of existence, no more than 90 days of	old, duly authenticated by the official	Johnson City, TN 37602 having custody of records in the			
(Use attachments if neces 9. Attached is a certificate jurisdiction under the law	Johnson City, TN 37602 JM Cox Jr PO Box 3891 Johnson City, TN 37602 sary) of existence, no more than 90 days of which it is organized. (If the certif	old, duly authenticated by the official ficate is in a foreign language, a trans	Johnson City, TN 37602 having custody of records in the			
(Use attachments if neces 9. Attached is a certificate	Johnson City, TN 37602 JM Cox Jr PO Box 3891 Johnson City, TN 37602 sary) of existence, no more than 90 days of which it is organized. (If the certif		Johnson City, TN 37602 having custody of records in the			
(Use attachments if neces 9. Attached is a certificate jurisdiction under the law of the translator must be standard. This document is exec	Johnson City, TN 37602 JM Cox Jr PO Box 3891 Johnson City, TN 37602 sary) of existence, no more than 90 days of which it is organized. (If the certiful ubmitted) uted in accordance with section 605.0	ficate is in a foreign language, a trans 9203 (1) (b), Florida Statutes. I am av	having custody of records in the lation of the certificate under oath ware that any false information			
(Use attachments if neces 9. Attached is a certificate jurisdiction under the law of the translator must be standard. This document is exec	Johnson City, TN 37602 JM Cox Jr PO Box 3891 Johnson City, TN 37602 sary) of existence, no more than 90 days of which it is organized. (If the certiful ubmitted) uted in accordance with section 605.0	ficate is in a foreign language, a trans	having custody of records in the lation of the certificate under oath ware that any false information			
(Use attachments if neces 9. Attached is a certificate jurisdiction under the law of the translator must be standard. This document is exec	Johnson City, TN 37602 JM Cox Jr PO Box 3891 Johnson City, TN 37602 sary) of existence, no more than 90 days of which it is organized. (If the certiful ubmitted) uted in accordance with section 605.0	ficate is in a foreign language, a trans 9203 (1) (b), Florida Statutes. I am av	having custody of records in the lation of the certificate under oath ware that any false information			
(Use attachments if neces 9. Attached is a certificate jurisdiction under the law of the translator must be standard. This document is exec	Johnson City, TN 37602 JM Cox Jr PO Box 3891 Johnson City, TN 37602 sary) of existence, no more than 90 days of which it is organized. (If the certiful ubmitted) uted in accordance with section 605.0 of the Department of State constitutes.	ficate is in a foreign language, a trans 9203 (1) (b), Florida Statutes. I am av	having custody of records in the lation of the certificate under oath ware that any false information			
(Use attachments if neces 9. Attached is a certificate jurisdiction under the law of the translator must be standard. This document is exec	Johnson City, TN 37602 JM Cox Jr PO Box 3891 Johnson City, TN 37602 sary) of existence, no more than 90 days of which it is organized. (If the certiful ubmitted) uted in accordance with section 605.0 of the Department of State constitutes.	ficate is in a foreign language, a trans 9203-(1) (b), Florida Statutes. I am av a hird degree felony as provided for	having custody of records in the lation of the certificate under oath ware that any false information			

Typed or printed name of signee



Division of Business Services Department of State

State of Tennessee 312 Rosa L. Parks AVE, 6th FL Nashville, TN 37243-1102

CCF PARTNERS LLC

TRACY FLEENOR **STE 200** 2304 SILVERDALE DRIVE JOHNSON CITY, TN 37601

Request Type: Certificate of Existence/Authorization

Request #:

0250326

Issuance Date: 09/12/2017

Copies Requested:

September 12, 2017

Document Receipt

Receipt #: 003570297

Filing Fee:

\$20.00

Payment-Credit Card - State Payment Center - CC #: 37/10766797

\$20.00

Regarding:

CCF Partners LLC

Filing Type:

Limited Liability Company - Domestic

Control #: Date Formed:

Formation/Qualification Date: 08/08/2017

Formation Locale: TENNESSEE

08/08/2017

917014

Status: Active Duration Term:

Perpetual

Inactive Date:

Business County: WASHINGTON COUNTY

CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

CCF Partners LLC

- * is a Limited Liability Company duly formed under the law of this State with a date of incorporation and duration as given above;
- * has paid all fees, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;
- * has appointed a registered agent and registered office in this State;
- * has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Secretary of State

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