113800000511

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL.
(Bu	isiness Entity Na	me)
(Do	ocument Number)	
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
WHT.	-769	- 314

Office Use Only



200303577662

09/22/17--01017--012 **125.00

17 OCT - S AM 8: 49

OCT 0 9 2017 Y SULKER



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 25, 2017

REBEKAH ROBERTSON 9345 INTERLINE AVE BATON ROUGE, LA 70909 US

SUBJECT: FROG BAYOU PROPERTIES, LLC

Ref. Number: W17000076314

We have received your document for FROG BAYOU PROPERTIES, LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker Regulatory Specialist II

Letter Number: 817A00019342

COVER LETTER

TO:

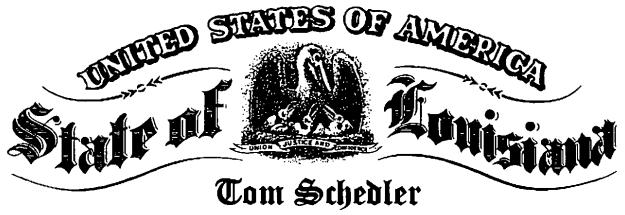
	r n n					
JEC	Frog Bayou Prope CT:					
			Limited Liability Co	ompany	_	
					nnsact Business in Florida," (y company to transact busine	
е ге	turn all correspondence c	oncerning this matter to the	following:			
		Rebe	kah Robertson			
		N	ame of Person		_	
		Frog Bay	on Properties, LLC			
	-	Fi	irm/Company			
		9345	Interline Avenue			
			Address			
		Baton	Rouge, LA 70909			
		City/S	tate and Zip Code			
		reba(@mresmail.com			
		E-mail address: (to be used	d for future annual re	eport not	ification)	
furth	er information concerning	this matter, please call:				
	Pam Odom, Bookkeep	er	225 at ()		-9592	
	Name o	f Contact Person	Area Code	Day	time Telephone Number	
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327] H	Division	<u>FADDRESS:</u> of Corporations ion Section uilding	
	Tallahassee, FL 32314		2	2661 Exc	reutive Center Circle see, FL 32301	
	is a check for the follow	-	D class on mil	r		
	■ \$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Certified Copy	ree &	☐ \$160.00 Filing Fee, Cer 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:

f name unavailable, enter alterna	ite name adopted	for the purpose of transacting business i	n Florida. The alt	ternate name must include "Limite	d Liabili	ity Company," "L.I	L.C," or "LLC.")
. Louisiana			_ 3.	45-5480871			
(Jurisdiction under the law)	of which foreign	imited liability company is organized)		(FE)	number	, if applicable)	
7/8/17	_						
	(Daic (See s	tirst transacted business in Florida, if pri- ections 605,0904 & 605,0905, F.S. to de	or to registration termine penalty i	liability)			
9345 Interline Aver	of Principal Offi		6.	9345 Interline Avenue	g Addres		
Baton Rouge, LA 7	•			Baton Rouge, LA 7080			<u>_</u> _
. Name and street add	lress of Flor	ida registered agent: (P.O. I	Box: NOT a	scentable)			
Name:	Shanda	2 (
Office Addres	s: <u>73 Mas</u>	on Avenue					
	Santa F	Rosa Beach		, Florida 32459			
esignated in this appl comply with the pro	registered ication, I he visions of a	(Cuy) agent and to accept service creby accept the appointment If statutes relative to the pro	it as registe	for the above stated lim cred agent and agree to	ited li act in	iability comp i this capacit	y. I further e
daving been named as esignated in this appl o comply with the pro nd accept the obligati	registered ication, I havisions of a ions of my p	agent and to accept service creby accept the appointment it statutes relative to the proposition as registered agent. (Registered age	nt as registe per and con the contraction of the co	for the above stated limered agent and agree to implete performance of	ited li act in my du	iability comp i this capacit	y. I further e
daving been named as esignated in this appl o comply with the pro nd accept the obligati	registered ication, I havisions of actions of my p	agent and to accept service creby accept the appointment statutes relative to the proposition as registered agent.	nt as registe per and cor int's signature) has/have a	for the above stated limered agent and agree to implete performance of	ited li act in my du	iability comp i this capacit	y I further o m familiar w AH 8: 45
laving been named as esignated in this appl ocomply with the pro nd accept the obligation. The name, title or c	registered ication, I havisions of any point of my point of any point of any point of a pacity and	agent and to accept service ereby accept the appointment statutes relative to the proposition as registered agent. (Registered agent address of the person(s) who Name and Address: Mickey L. Robertson	nt as registe per and con int's signature) to has/have a	for the above stated limered agent and agree to implete performance of authority to manage is/a	ited li act in my du	iability comp this capacity tries, and Fa	y I further d m familiar w Af 80 45 Address:
laving been named as esignated in this apploperated in this apploperated in the properate of the obligation. 3. The name, title or capacity:	registered ication, I havisions of any point of my point of any point of any point of a pacity and	agent and to accept service ereby accept the appointment statutes relative to the proposition as registered agent. (Registered agent address of the person(s) who Name and Address:	nt as registe per and con int's signature) to has/have a	for the above stated limered agent and agree to implete performance of multiplete performance of muthority to manage is/attle or Capacity:	ited li act in my du	Name and A	is I further a m familiar w A 80 Address: Robertson
laving been named as esignated in this apploperated in this apploperated in the properate of the obligation. 3. The name, title or capacity:	registered ication, I havisions of any point of my point of any point of any point of a pacity and	agent and to accept service ereby accept the appointment statutes relative to the proposition as registered agent. (Registered age address of the person(s) who Name and Address: Mickey L. Robertson 10112 Ridgely Road	nt as registe per and con int's signature) to has/have a	for the above stated limered agent and agree to implete performance of multiplete performance of muthority to manage is/attle or Capacity:	ited li act in my du	Name and A	I further of m familiar w Aff Address: Robertson ely Road
laving been named as esignated in this apploperated in this apploperated in the properate of the obligation. 3. The name, title or capacity:	registered ication, I havisions of actions of my page apacity and	agent and to accept service ereby accept the appointment statutes relative to the proposition as registered agent. (Registered age address of the person(s) who Name and Address: Mickey L. Robertson 10112 Ridgely Road	nt as registe per and con int's signature) to has/have a	for the above stated limered agent and agree to implete performance of multiplete performance of muthority to manage is/attle or Capacity:	ited li act in my du	Name and A	I further of m familiar w Aff Address: Robertson ely Road
laving been named as esignated in this apple of comply with the prond accept the obligation. 3. The name, title or carries of Capacity: Managing Member of Managing Member of Capacity: Attached is a certific	cessary) ate of existe	agent and to accept service creby accept the appointment of statutes relative to the proposition as registered agent. (Registered age address of the person(s) who Name and Address: Mickey L. Robertson 10112 Ridgely Road Baton Rouge, LA 70809	ont as register per and constitution of the signature) o has/have a Tist Mi	for the above stated limered agent and agree to implete performance of muthority to manage is/antle or Capacity: anaging Member	nited h act in my du	Name and A Rebekah G. 10112 Ridg Baton Roug	Address: Robertson elv Road ec. LA 70809

Typed or printed name of signee



SECRETARY OF STATE

As Secretary of State of the State of Louisiana, I do hereby Certify that

the Articles of Organization of

FROG BAYOU PROPERTIES, LLC

Domiciled at BATON ROUGE, LOUISIANA,

Were filed in this Office and a Certificate of Organization was issued on July 29, 2010,

I further certify that no Certificate of Dissolution or Termination has been issued.

in testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

October 3, 2017

Secretary of State Web 40265725K



Certificate ID: 10875470#UAR93

To validate this certificate, visit the following web site, go to Business Services, Search for Louisiana Business Filings, Validate a Certificate, then follow the instructions displayed.

www.sos.la.gov